

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002210

Entity Name: ORTHO TECHNOLOGY, INC.**Current Principal Place of Business:**4614 PET LANE
SUITE D-101
LUTZ, FL 33559**Current Mailing Address:**4614 PET LANE
SUITE D-101
LUTZ, FL 33559 US**FEI Number:** 45-5042500**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :****Title** DIRECTOR, SECRETARY, SENIOR
VICE PRESIDENT**Name** ETTINGER, MICHAEL S**Address** C/O HENRY SCHEIN, INC
135 DURYEA ROAD E-365**City-State-Zip:** MELVILLE NY 11747**Title** DIRECTOR, EXECUTIVE VICE
PRESIDENT**Name** MLOTEK, MARK E**Address** 4300 STINE ROAD
SUITE 209**City-State-Zip:** BAKERSFIELD CA 93313**Title** DIRECTOR, EXECUTIVE VICE
PRESIDENT, CFO**Name** PALADINO, STEVEN**Address** C/O HENRY SCHEIN, INC
135 DURYEA ROAD E-365**City-State-Zip:** MELVILLE NY 11747**Title** PRESIDENT**Name** BRESLAWSKI, JAMES P**Address** 135 DURYEA ROAD**City-State-Zip:** MELVILLE NY 11747

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL S. ETTINGER**SECRETARY****04/27/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date