2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2022
Secretary of State
3071223440CC

DOCUMENT# F22000000003

Entity Name: MYPLANADVOCATE INSURANCE SOLUTIONS INC.

Current Principal Place of Business:

460 WEST 50 NORTH SUITE 500
SALT LAKE CITY, UT 84101

Current Mailing Address:

460 WEST 50 NORTH SUITE 500
SALT LAKE CITY, UT 84101

FEI Number: 87-2644457

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	PRESIDENT
Name	MOODY, KYAL
Address	25022 MUSTANG DR
City-State-Zip:	LAGUNA HILLS CA 92653

Title	VP
Name	LITTLE, GRANT
Address	1020 WEATHERFORD TRL
City-State-Zip:	LEWISVILLE NC 27023

Title	SECRETARY
Name	GALLAGHER, SEAN
Address	300 N END AVE #10D
City-State-Zip:	NEW YORK NY 10282

Title	DIRECTOR
Name	KARFUNKEL, BARRY
Address	460 WEST 50 NORTH SUITE 500
City-State-Zip:	SALT LAKE CITY UT 84101

Title	TREASURER
Name	STERNHELL, MARK
Address	50 MILE RD
City-State-Zip:	MONTEBELLO NY 10901

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: SEAN GALLAGHER SECRETARY 04/25/2022

Electronic Signature of Signing Officer/Director Detail — Date