Name and Address of Ourient Registered Agent.						
CT CORPORAT 1200 SOUTH PI PLANTATION, F	NE ISLAND ROAD					
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: CT CORPORATION SYSTEM- LESLIE MARTIN				04/14/2022		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	DIRECTOR	Title	SECRETARY, VP			
Name	BATSON, CHRIS	Name	MCMANUS,, CHRISTOPHER			
Address	1315 W. CENTURY DRIVE, SUITE 100	Address	1315 W. CENTURY DRIVE, SUI	TE 100		
City-State-Zip:	LOUISVILLE CO 80027	City-State-Zip:	LOUISVILLE CO 80027			
Title	PRESIDENT, DIRECTOR	Title	VP, TREASURER			

1315 W. CENTURY DRIVE, SUITE 100 LOUISVILLE. CO 80027 US

Current Principal Place of Business:

1315 W. CENTURY DRIVE, SUITE 100

LOUISVILLE, CO 80027

FEI Number: 11-3472971

Current Mailing Address:

Name and Address of Current Registered Agent:

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: MCMANUS, CHRISTOPHER

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Name

Address

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT	
DOCUMENT# F1300000649	

Entity Name: MANAGEMENT HEALTH SOLUTIONS, INC.

Name

Address

City-State-Zip: LOUISVILLE CO 80027

JOHNSON, BRUCE

1315 W. CENTURY DRIVE, SUITE 100

SECRETARY

BATSON, CHRIS

City-State-Zip: LOUISVILLE CO 80027

1315 W. CENTURY DRIVE, SUITE 100

04/14/2022

FILED Apr 14, 2022 Secretary of State 0967426311CC

Date