



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2018  
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

RECORDED  
CORPORATE  
2019 MAY 13 AM 11:56

1. Entity ID Number 001662367		2. Exact name of the Corporation Ginger.io, of California Medical PC							
3. Principal Office Address 116 New Montgomery Street Floor 5		City San Francisco	State CA						
4. NAICS Code 621330		6. Brief description of the character of business conducted in Rhode Island Health Coaching							
5. State of Incorporation CA									
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>									
President Name Omar Dawood		Vice-President Name							
Street Address 116 New Montgomery Street Floor 5		Street Address							
City San Francisco	State CA	Zip 94105							
Secretary Name		Treasurer Name							
Street Address		Street Address							
City	State	Zip							
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>									
Director Name Omar Dawood		Director Name							
Street Address 116 New Montgomery Street Floor 5		Street Address							
City San Francisco	State CA	Zip 94105							
Director Name		Director Name							
Street Address		Street Address							
City	State	Zip							
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>							
This information is currently of record in the Department of State.		<table border="1"> <thead> <tr> <th>NUMBER OF SHARES</th> <th>CLASS/SLR/ILS</th> <th>PAR VALUE</th> </tr> </thead> <tbody> <tr> <td>100</td> <td>common shares</td> <td>0</td> </tr> </tbody> </table>		NUMBER OF SHARES	CLASS/SLR/ILS	PAR VALUE	100	common shares	0
NUMBER OF SHARES	CLASS/SLR/ILS	PAR VALUE							
100	common shares	0							
Changes require an additional filing.									
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.									
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.									
Name of Authorized Representative Hinslie Mayberry, Asst Sec'y		Date 5/8/19							
Signature of Authorized Representative <i>Hinslie Mayberry</i>		SIGN DOCUMENT HERE <b>FILED</b>							

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

MAY 28 2019  
BY SNPND  
A.A. 12:57pm  
FORM 630 - Revised: 10/2017