

LARA Corporations
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Department of Licensing and Regulatory Affairs

Form Revision Date 07/2016

CERTIFICATE OF ASSUMED NAME

For use by FOREIGN PROFIT CORPORATION

Pursuant to the provisions of Act 284, Public Acts of 1972, the undersigned execute the following Certificate:

1. The identification number assigned by the Bureau is:

802566137

2. The name of the profit corporation is:

TWOMAGNETS INC.

3. The assumed name under which business is to be transacted is:

CLIPBOARD HEALTH

This document must be signed by an authorized officer or agent (corporations); a member, manager, or an authorized agent (limited liability companies); or general partner (limited partnerships):

Signed this 14th Day of March, 2022 by:

| Signature | Title | Title if "Other" was selected |
|-----------|-----------|-------------------------------|
| WEI DENG | President | |

By selecting ACCEPT, I hereby acknowledge that this electronic document is being signed in accordance with the Act. I further certify that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

Decline Accept

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS

FILING ENDORSEMENT

This is to Certify that the CERTIFICATE OF ASSUMED NAME

for

TWOMAGNETS INC.

ID Number: 802566137

to transact business under the assumed name of
CLIPBOARD HEALTH

received by electronic transmission on March 14, 2022 ***, is hereby endorsed.***

Filed on March 14, 2022 ***, by the Administrator.***

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.

Expiration Date: December 31, 2027



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 14th day of March, 2022.

Linda Clegg

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau