

For Office Use Only

STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION CORPORATION California Secretary of State 1500 11th Street Sacramento, California 95814

(916) 657-5448

_	F	11	F	ה:
_				- –

File No.: BA20241727707 Date Filed: 9/27/2024

Entity Details							
Corporation Name				Rochelle Herndon Health Insurance Services			
Entity No.				6401383			
Formed In				CALIFORNIA			
Street Address of Principal Office	of Corpo	pration					
Principal Address			78015 BANYON GROVE COURT				
			PALM DESERT, CA 92211				
Mailing Address of Corporation							
Mailing Address			78015 BANYON GROVE COURT				
Attention			PALM DESERT, CA 92211				
Street Address of California Offic	e of Corp	oration					
Street Address of Califor	•		None	è			
Officers							
Officer Name		Officer Address			Position(s)		
	70015	BANYON GROVE COURT			.,		
+ Rochelle Herndon	+ Rochelle Herndon 78015 PALM		T Chief Executive Officer, Chief Financial Officer, Se		Chief Financial Officer, Secretary		
Additional Officers							
Officer Name		Officer Address		Position	Stated Position		
None Entered							
			Intere	u			
Divertere							
Directors							
	Director	Name	Director Address				
+ Rochelle Herndon			78015 BANYON GROVE COURT PALM DESERT, CA 92211				
			FAL	1 DESERT, CA 3221	L		
The number of vacancies on Board of Directors is: 0							
Agent for Service of Process							
Agent Name			Rochelle Herndon				
Agent Address			78015 BANYON GROVE COURT				
			PALM DESERT, CA 92211				
Type of Business							
Type of Business			Heal	th Insurance			
Email Notifications							
Opt-in Email Notifications			Yes,	I opt-in to receive ent	tity notifications via email.		
Labor Judgment	Labor Judgment						
No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards							
Enforcement or a court	Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or						
provision of the Labor Code.							

Electronic Signature							
By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.							
Stephen Newell	09/27/2024						
Signature	Date						