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July 18, 2017

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Via Certified Mail – Return Receipt Requested

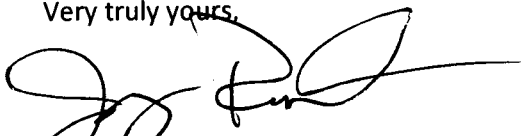
Top Hat Plan Exemption
Employee Benefits Security Administration
U. S. Department of Labor, 200 Constitution Avenue NW
Washington, D. C. 20210

Dear Sir or Madam:

On behalf of our client, Echo Health, Inc. (the "Employer"), 868 Corporate Way, Westlake, Ohio 44145, EIN: 34-1858379, we hereby file this declaration that the Employer maintains one plan primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees; and there are four (4) employees currently participating in this plan.

If you have any questions, please contact the undersigned at the number shown above.

Very truly yours,



Jeffrey A. Perlmutter

cc: Kris Kern

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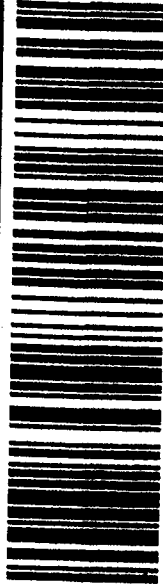
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