



A breakthrough in the treatment of  
mild-to-moderate sleep apnea

*Vivos Therapeutics, Inc.  
February 2020*

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## Milestones

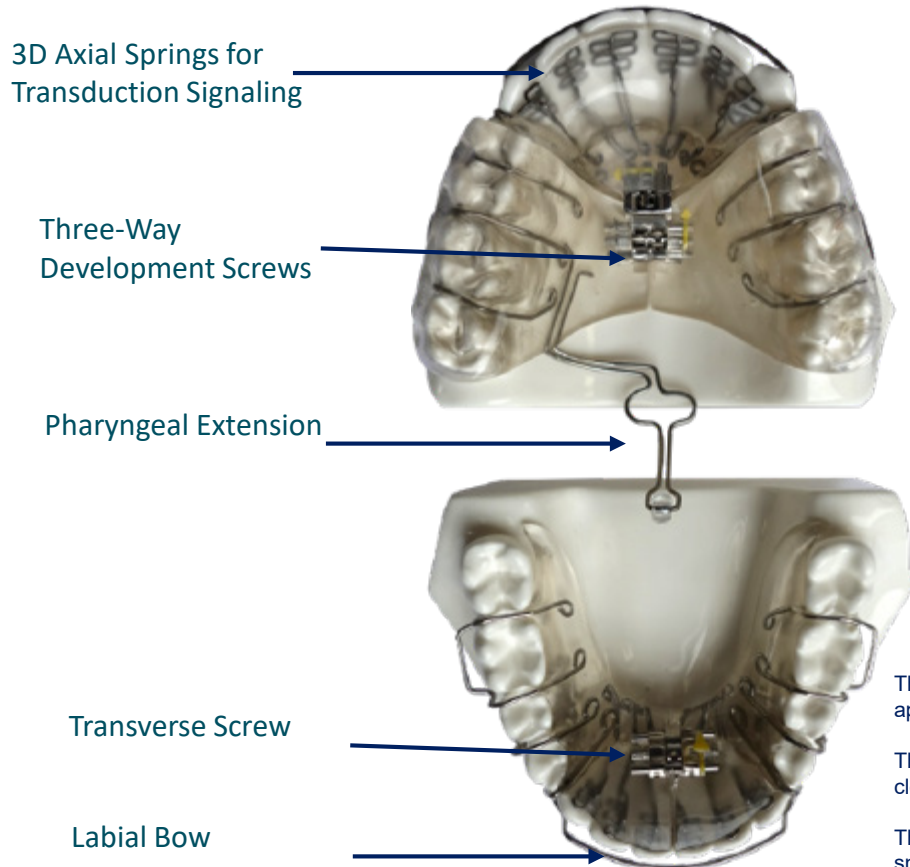
- 2004-09:** Dr. Singh Publishes “*Spatial Matrix Hypothesis*” and other related articles to our technology
- 2007:** Formation of BioModeling Solutions, Inc. in Beaverton, OR
- 2008:** DNA appliance registered as Class I device with FDA.
- 2009-15:** 8 US patents, 2 Canadian patents and trademarks issued
- 2009-20:** Published approx. 50 articles and studies in professional and peer-reviewed journals demonstrating efficacy and clinical outcomes
- 2014:** Received FDA 510k approval for mRNA appliance as a Class II device to treat mild-to-moderate OSA, snoring and SDB
- 2016:** Reverse merger of BioModeling Solutions (DNA appliance system) and Vivos.
- 2017-18:** Established bricks and mortar retail clinics in Colorado and Utah featuring The Vivos System
- 2018:** **Revenue = \$3.7M (changed business model to leverage existing dental practices)**
- 2018:** Verified FDA approved status of six (6) contract manufacturers; 7<sup>th</sup> pending
- 2019:** Launch of Institute of Craniofacial Sleep Medicine (ICSM) training center in Denver, CO
- 2019:** FDA admin review by CDRH for 510k for DNA appliance underway

## Milestones

- 2019:** Launched Billing Intelligence Service for medical billing services
- 2019:** Partnership with Benco Dental signed in rollout in Q1 2020 increasing sales distribution to over possible 400 sales agents
- 2019:** EU European Patent issued and validated in 10 EU countries (expires 2029)
- 2019:** Surpassed 14,000 total cases treated with the Vivos System
- 2019:** **Revenue = \$11.2M**
- 2019:** Signed preliminary agreements to acquire world’s first patented urine based pediatric diagnostic test
- 2019:** 1<sup>st</sup> WIRB approved pediatric clinical trial for DNA appliance patients ages 7-19
- 2020:** Expanded Vivos Integrated Network across five geographic areas in North America
- 2020:** 2<sup>nd</sup> WIRB approved pediatric clinical trial for guides ages 6-18
- 2020:** Stanford University IRB approved pending February for Vivos mRNA adults ages 21-63
- 2020:** Surpassed 1,300 total Vivos-trained dentists across 38 US States
- 2020:** Expected Q2 rollout of VivosAire practice management software

# The Vivos System has been shown to significantly lower Apnea Hypopnea Index (AHI) scores and improve other conditions associated with Obstructive Sleep Apnea (OSA)

## Biomimetic Oral Appliance



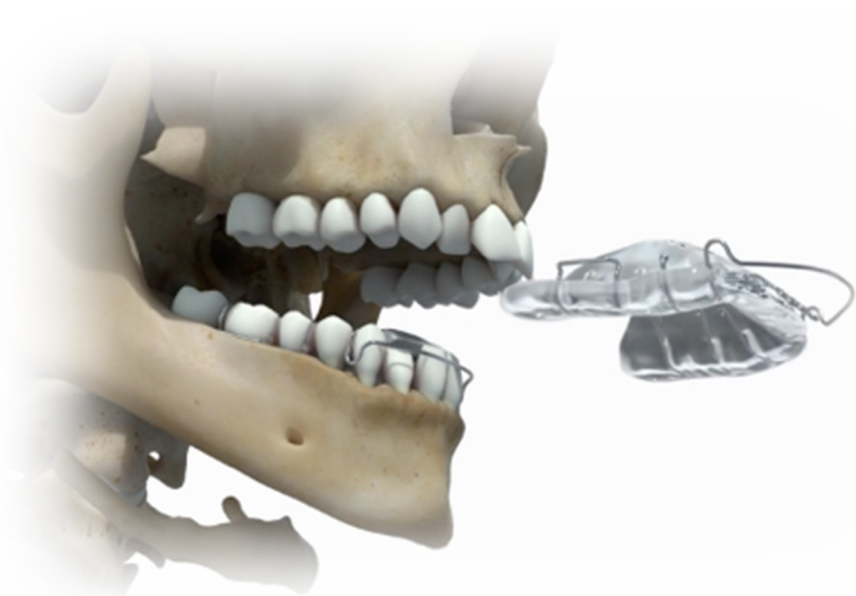
Hard and soft tissues of the craniofacial complex can be non-surgically remodeled and enhanced using the proprietary Vivos System devices and clinical protocols



The Vivos DNA appliance shown is registered as a Class I oral appliance for palatal expansion.

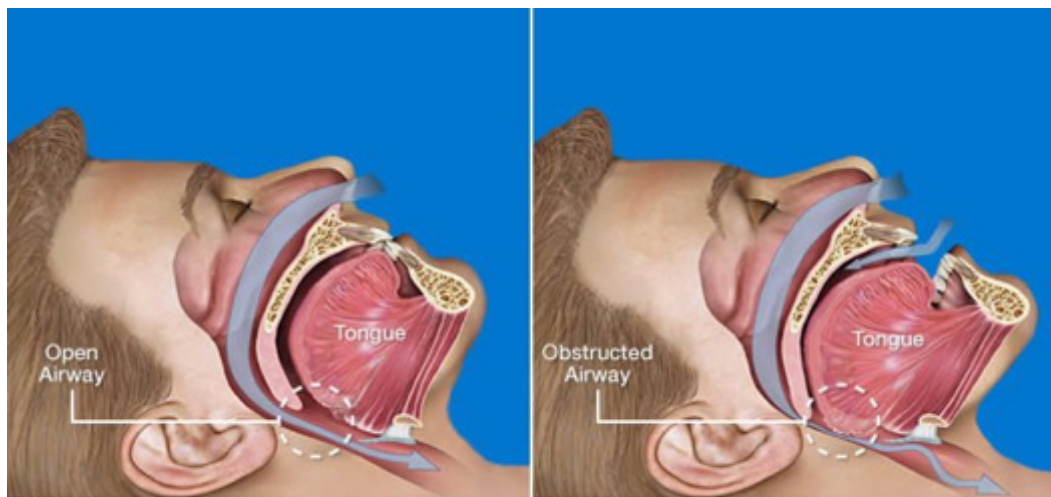
The mRNA appliance, a version of the DNA appliance is FDA cleared as a Class II appliance.

The mRNA is cleared to treat mild to moderate sleep apnea, snoring and sleep disordered breathing in adults.



# OSA is a Chronic Disease that Affects over 1 Billion People Globally

Typical Obstructive Sleep Apnea Event



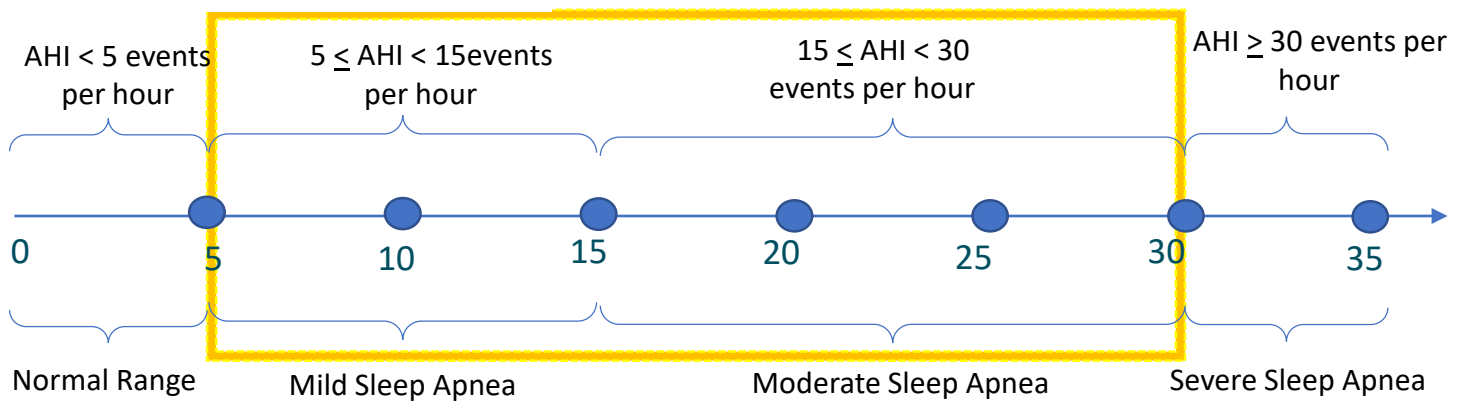
OSA is Caused by an Obstruction of the Airway

Apnea-Hypopnea Index (AHI) measures sleep apnea severity. The AHI is the sum of the number of apneas (pauses in breathing) plus the number of hypopneas (periods of shallow breathing) that occur, on average, each hour. Apneas and hypopneas, collectively called events, must last at least 10 seconds to count as an event.

Non-Obstructed Airway

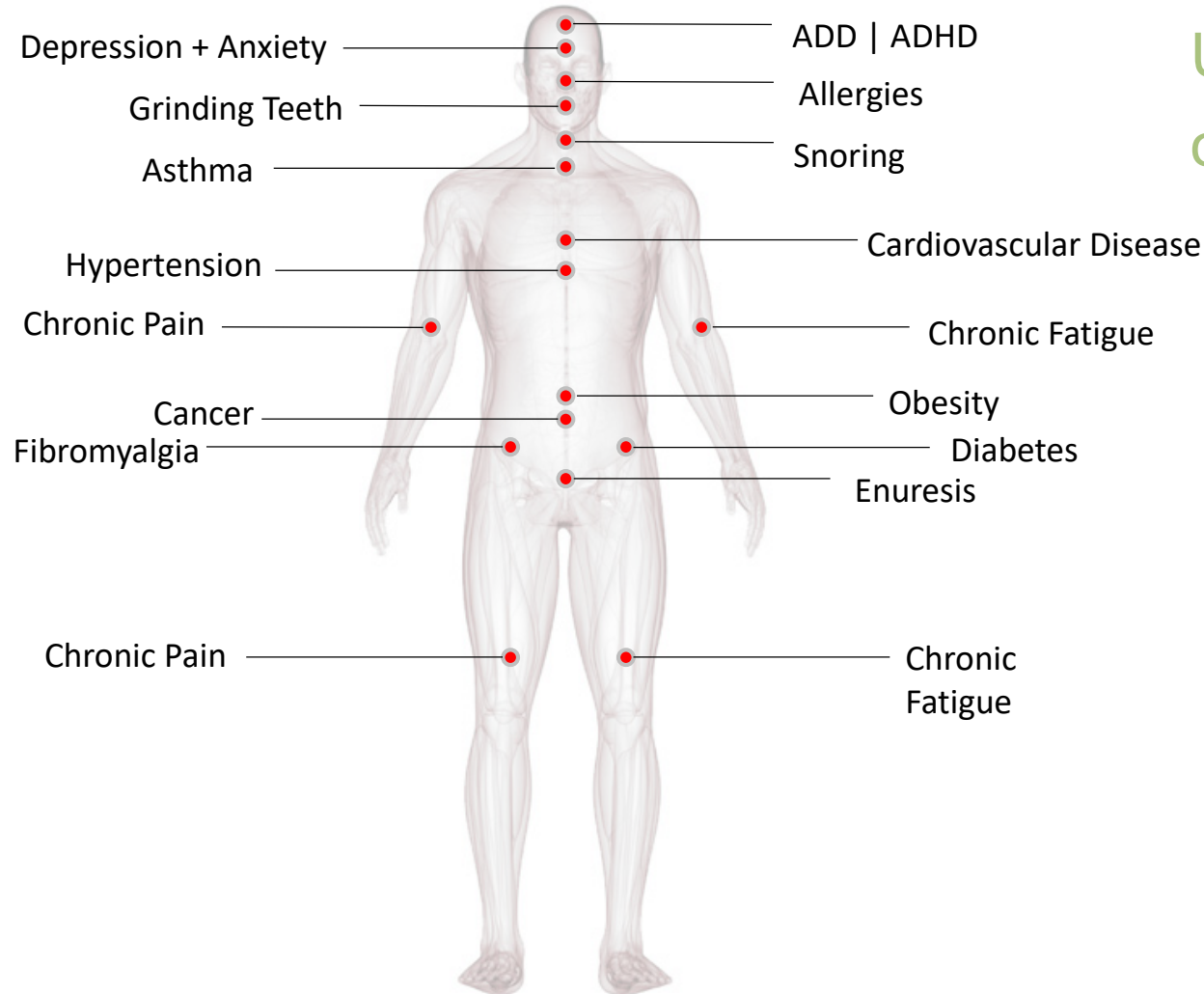
Obstructed Airway

## Vivos' Focus



Range of Sleep Apnea

1) Krafton, The Global Burden of Obstructive Sleep Apnea, Sept 11, 2019



Untreated OSA can impact every organ system in the body

### Untreated OSA Multiplies Serious Health Risks

**2x**

The risk for stroke <sup>1</sup>

**2x**

The risk for sudden cardiac death <sup>2</sup>

**5x**

The risk from cardiovascular mortality <sup>3</sup>

**57%**

Increased risk for recurrence of Atrial Fibrillation after ablation <sup>4</sup>

1. Redline et al, The Sleep Heart Health Study. Am J Res and Crit Care Med 2010
2. Gami et al, J Am Coll Cardiol 2013.
3. Young et al, J Sleep 2008.
4. Li et al, Europace 2014.

- More than 14,000 patients treated with The Vivos System
- Can reduce or possibly eliminate the need for surgery or lifetime CPAP or mandibular advancement oral therapy
- Affordable and treatment applicable and effective in people of all ages
- Insurance reimbursement – most major commercial insurance payers reimburse for our treatment
- Proven management team leading approximately 120 employees
- \$69bn North American market opportunity
- Shown to significantly lower apnea Hypopnea Index (AHI) scores and improve other conditions associated with OSA
- FDA cleared and registered appliances
- Significant IP body of clinical evidence across 50 published studies



# Strong Market Opportunity For a Potentially Permanent Solution to OSA

## Prevalence & Economic Cost

- ✓ Sleep Apnea affects 1 Billion people worldwide
- ✓ Approximately 54 Million people in the U.S. with moderate to severe OSA
- ✓ Costs Associated with OSA in United States in 2015 = 162 Billion
- ✓ OSA is associated with an increase in:
  - Hypertension
  - Heart Disease
  - Diabetes
  - Asthma / Breathing Disorders
  - Insomnia
  - Depression / Anxiety / Mental Health

Adults with Moderate to Severe OSA in US =  
**54 Million**

Published study by international panel of leading researchers, reported that nearly 1 billion people worldwide have sleep apnea.<sup>1</sup>

Effective treatment in **87%** of patients predicated to successfully treated with OSA



North American addressable market that are candidates for Vivos =  
**+43.2 Million People**

Vivos North American Market =  
**~\$ 69 Billion**

1) Benjafield, Ayeas, et al. Estimation of the global prevalence and burden of obstructive sleep apnoea: a literature-based analysis, July 09, 2019

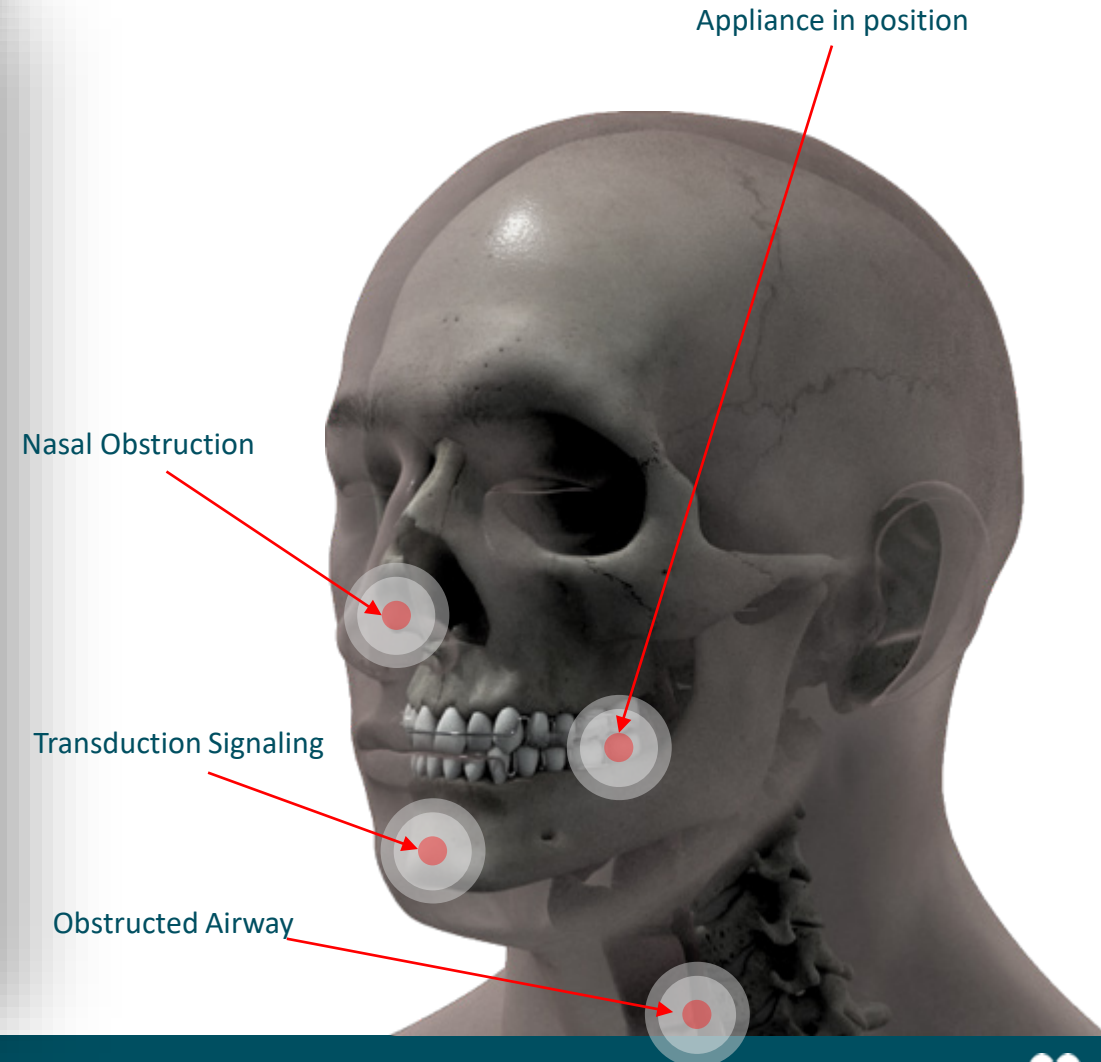


# Vivos vs. The Competition...

	Non-Surgical Options			Surgical Options		
Product or Treatment Protocol		CPAP	Oral Appliance Therapy		Uvulopalatopharyngoplasty (UPPP)	Maxillomandibular Advancement Surgery
Treats Underlying Cause	Yes	No	No	No	Yes	Yes
Time to Resolve Symptoms	Potentially Immediate	Potentially Immediate	Potentially Immediate	Potentially Immediate	Potentially Immediate	Potentially Immediate
Overall Efficacy	High with good patient compliance	High but patient compliance is low	High with good patient compliance	Good with proper patient screening and case selection	Low to medium effectiveness	High
Pain	Very minor or none	Very minor or none	Very minor or none	In some cases	During recovery	During recovery
Potential Negative Side Effects	Minor and/or cosmetic	Moderate	Moderate	Major	Major	Major
Treatment Time	Average 9-18 months	Lifetime	Lifetime	Lifetime	Surgery + healing time	Surgery + healing time
Duration of Benefits	Many years to lifetime	Only when device is in use	Only when device is in use	Only when device is in use	Limited and fade with time	Many years to lifetime
Portability	Yes	No	No	N/A	N/A	N/A
Potential Cosmetic Benefits	Yes	No	No	No	No	Yes
Impact on TMJ	May resolve many TMJ issues	No known positive impact	May create or exacerbate TMJ	No known positive impact	No known positive impact	No known positive impact

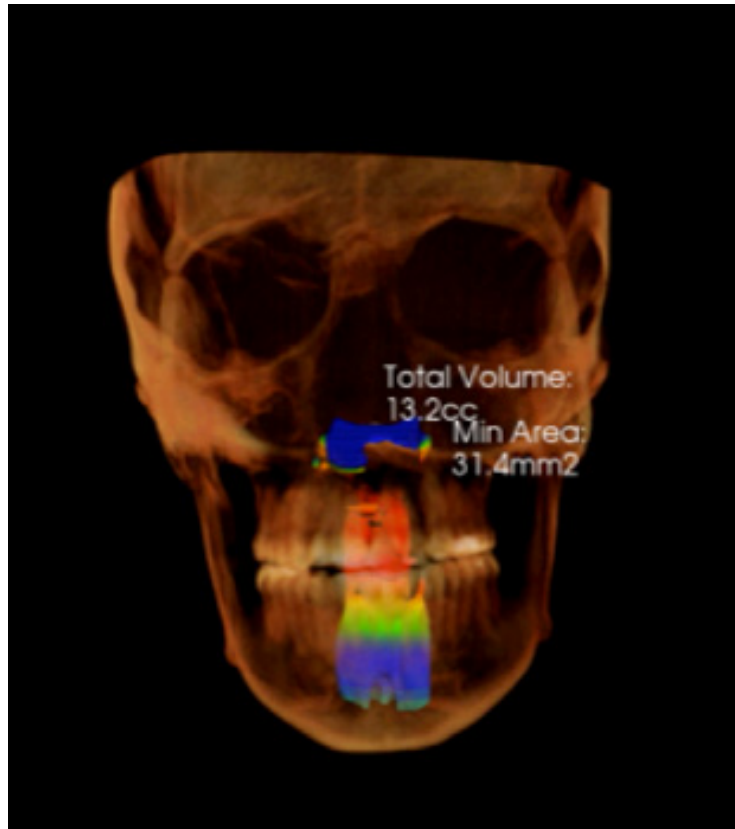
## The Vivos System Offers Significant Benefits

- ✓ Average treatment is approximately 18-24 months, after which no further intervention is required for most patients
- ✓ Oral appliances are comfortable to wear
- ✓ Safe and noninvasive
- ✓ Offers a non-surgical, non-pharmaceutical option for patients with OSA
- ✓ Treats OSA by remodeling and enhancing the soft and hard tissues constituting the human airway
- ✓ Easy to comply with treatment protocols
- ✓ Reduce or possibly eliminate the need for surgery or lifetime CPAP or mandibular advancement therapy
- ✓ Treatment applicable and effective in patients of almost all ages
- ✓ Both near term and long-term benefits (no waiting months to see improvements)



# Objective Measures Show the Impact of The Vivos System on an upper human airway

## 3D CBCT SCANS – BEFORE AND AFTER TREATMENT



Before (March 2017)

### 30 Year Old Male 14 Months Treatment

#### BEFORE

31.4mm<sup>2</sup>

13.2cc

Min Area:

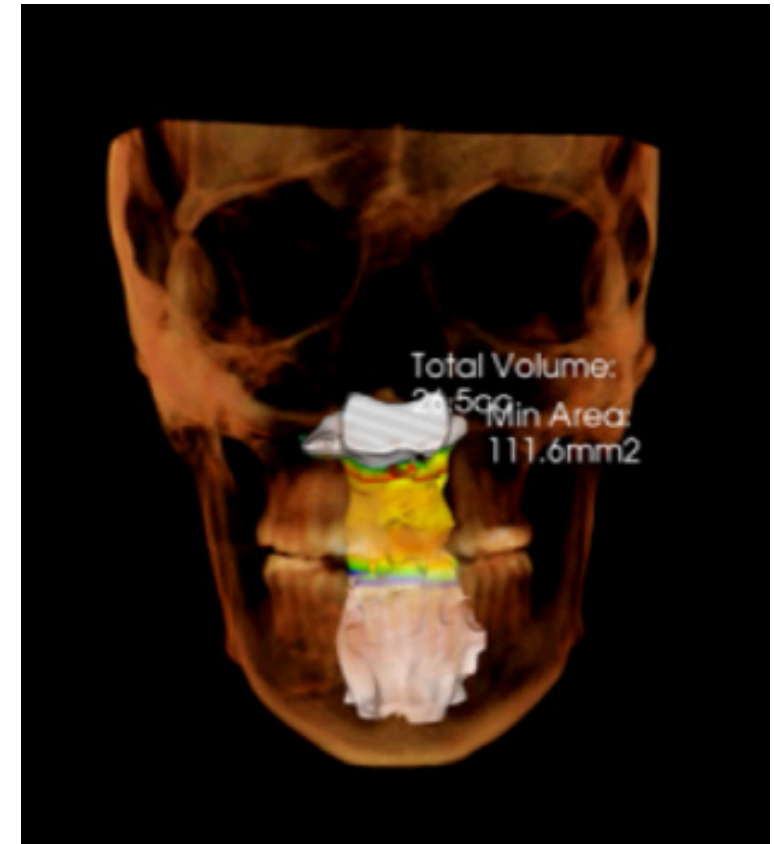
Total Volume:

#### AFTER

111.6mm<sup>2</sup>

26.5cc

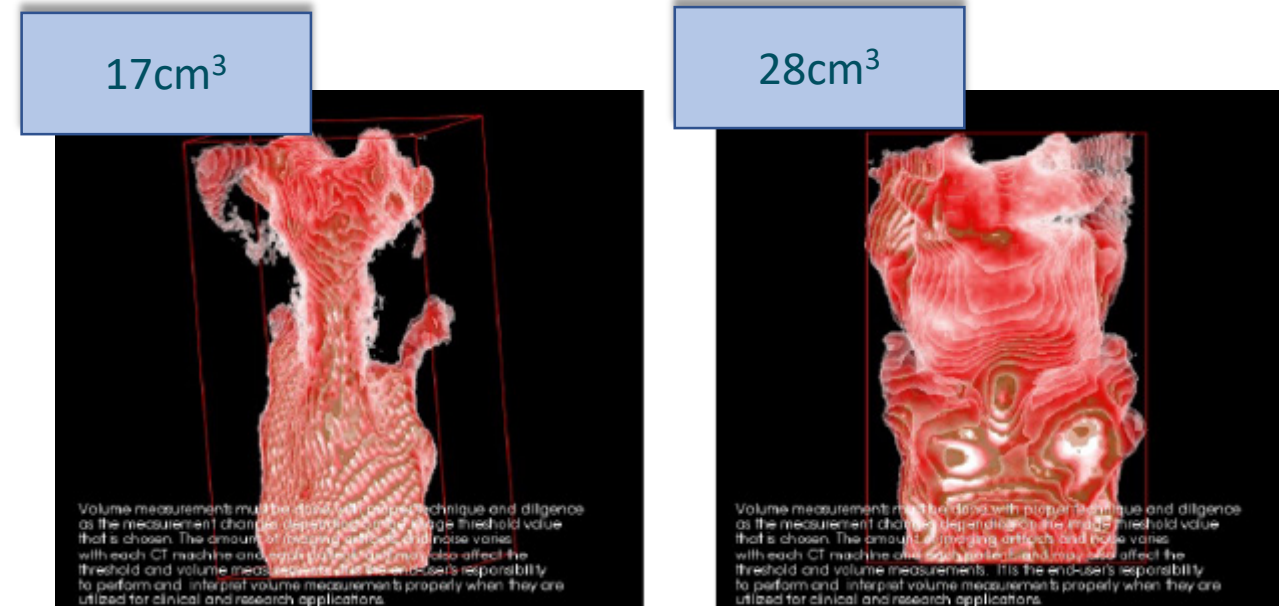
*Min Area: Minimum Surface Area of Airway  
Total Volume: Total Volume of Airway as  
measured on the scans*



After (May 2018)

- The Vivos System designed to promote proper growth, development, and positioning of the craniofacial complex.
- As treatment unfolds, a patient's airway typically widens and expands, restoring or improving natural nasal breathing function.

Figures 1 and 2 below show an upper airway volume before and after treatment. With a widened airway and easier breathing, the symptoms of sleep disordered breathing are often greatly reduced or eliminated.



Singh and Cress, Dent Today 2013

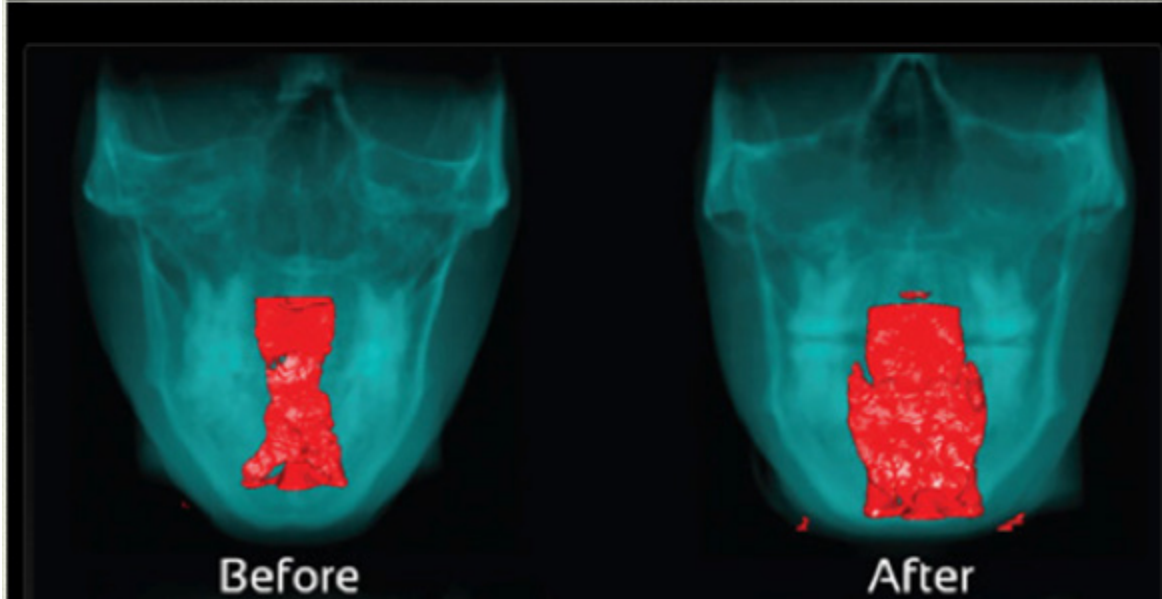
*The content of this presentation is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have seen in this presentation. Individual results may vary.*



Singh, Heit et al., J Ind Orthod Soc. 2014



**A wider maxilla means a wider airway**



**A wider airway means optimal breathing**

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## We have a Strategic and Targeted Approach to Market Development



### Market Development

- ✓ We train Dentists throughout North America through regional Sales Advisors
- ✓ We hold sales presentations to dentists throughout the US in conjunction with our Strategic Partners such as Benco Dental
- ✓ Vivos continues to built a referral networks with physicians across the treatment continuum

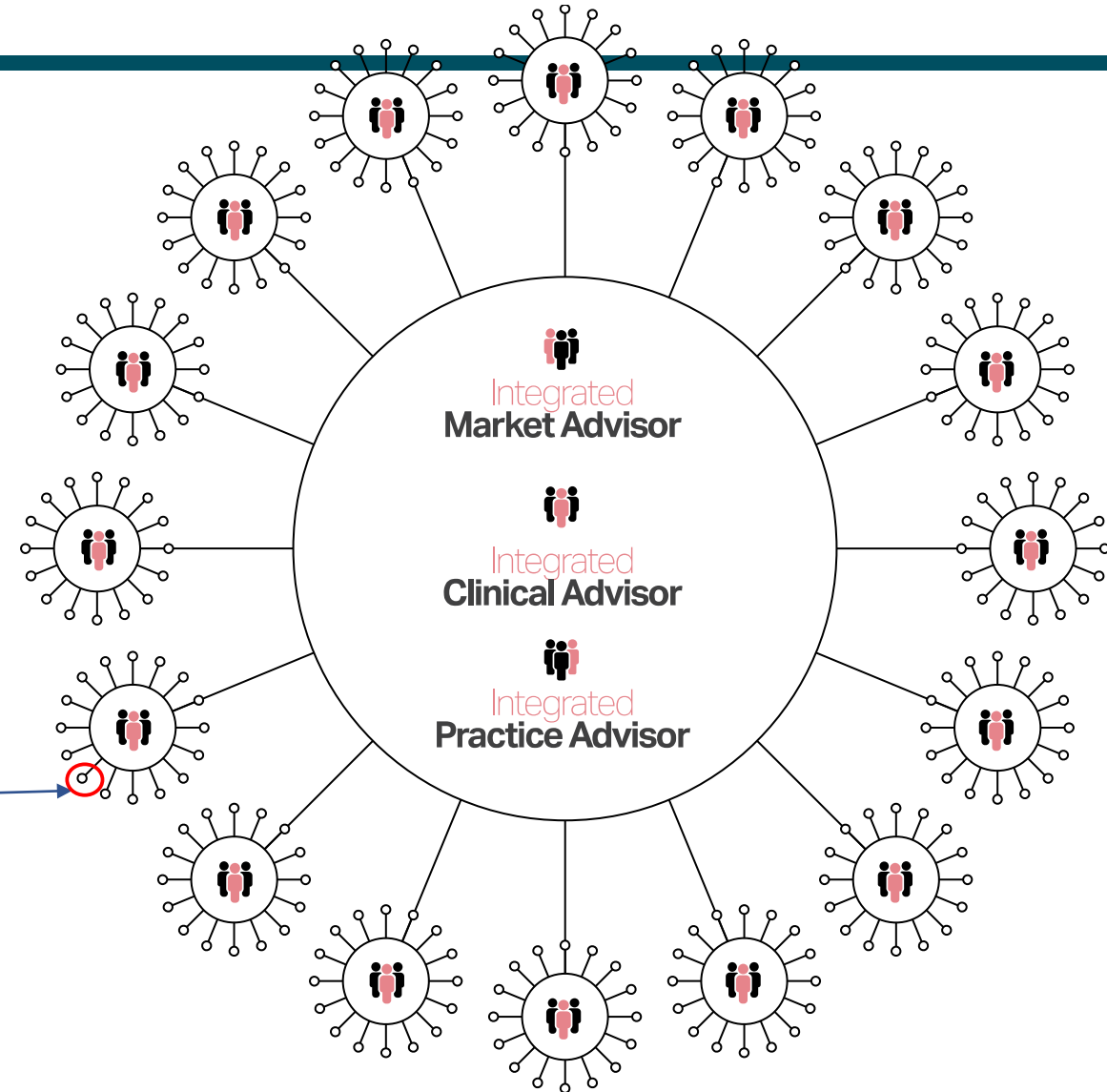
# Keys To Developing a Productive Territory

## The Integrated Network

*When a Dentist becomes a Vivos Integrated Practice (VIP), they are placed into a localized support system that includes:*

- **Market Advisor**
- **Clinical Advisor**
- **Practice Advisor**

New VIP





Dentists have hundreds of patients, of all ages, suffering from OSA.

- Typical VIP Dentist has between 400-800 existing patients who may suffer from (undiagnosed) OSA
- Represents a multi-million-dollar revenue opportunity for dental practices

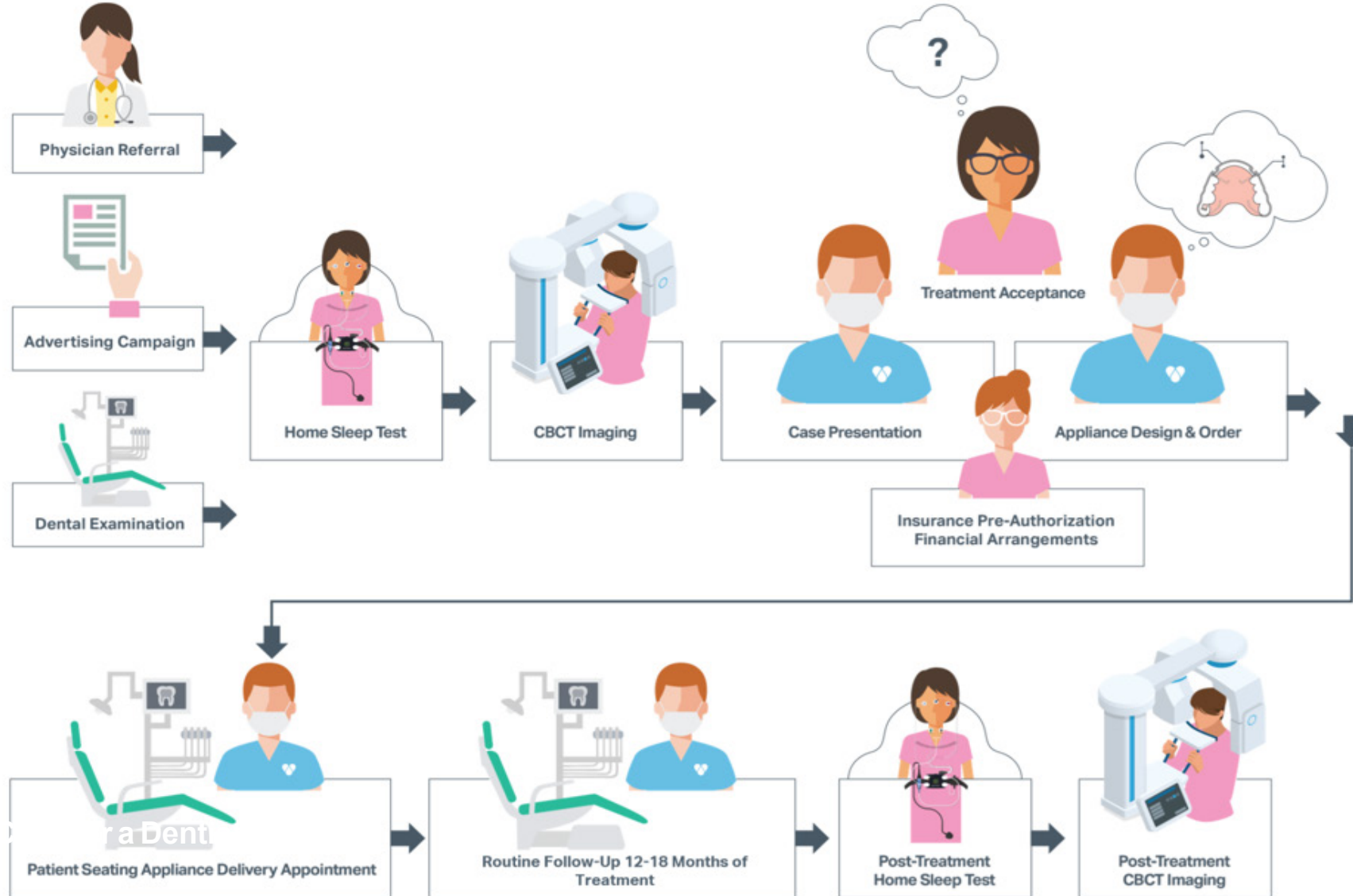
Number of Active Patients in Dental Practice	Potential Patients with OSA in Dental Practice	Potential Additional Revenue for Dentist
1,500	480	\$3,840,000
1,750	525	\$4,200,000
2,000	600	\$4,800,000
2,250	675	\$5,400,000
2,500	750	\$6,000,000
2,750	825	\$6,600,000
3,000	900	\$7,200,000

**Illustrative Economics of an Individual Case for a Dentist**

Typical Case Fee to Patient  
**\$8,000**

Dentist Cost  
**\$2,000**

Gross Margin  
**\$6,000**



## Coding

- ✓ DME (Durable Medical Device)
- ✓ CPT code E0486
- ✓ Other CPT codes based on case

## Payment

- ✓ Level of reimbursement is based on each individual policy

## Coverage

- ✓ Many major US commercial medical payors

- Percentage of claims paid depends on several factors, including: Cost of treatment from individual provider; Patient's Medical Policy; Medical Payer's Guidelines
  - Cost of treatment from individual provider
- Medical insurance is never a guarantee of payment, and patient deductibles may vary – Varies By Policy
  - Cost of treatment from individual provider



<u>Year</u>	<u>Raise</u>	<u>Post Money Valuation</u>	<u>Revenue</u>
2016	1M	12.5M	900K
2017	3.75M	16M	1.1M
2018	1.1M	45M	3.7
2018	5M	85M	
2019	1.16M	100M	11.2M
2019	3.6M	Convertible Debt	
2020-21	Planned IPO		
	TTM Revenue	11.2M	
	TTM Loss	-10.4M	
	Market Cap	\$\$\$\$	

<u>Year</u>	<u>Raise</u>	<u>Post Money Valuation</u>	<u>Revenue</u>
2007	6.18M	11.18M	0
2009	17M	40.89M	0
2012	14.50M	40.27M	0
2013	6.08M	60.12M	0
2014	40M	178.8M	0
2016	12.50M	112.50M	8M
2018	108M IPO	323.85M 9.5X	33.3M
2018	100M	915M	43.99M
	TTM Revenue	71.7M	
	TTM Loss	-30.5M	
	Market Cap	1.953B	

# 2019 Preliminary Unaudited Results vs. 2018 Audited Results



	<b>Years Ended December 31,</b>	
	<b><u>2019</u></b>	<b><u>2018</u></b>
<b>Revenue</b>		
Product revenue	\$ 4,249,624	\$ 1,848,375
Service revenue	<u>7,002,930</u>	<u>1,943,886</u>
Total revenue	11,252,554	3,792,261
<b>Cost of sales</b> (exclusive of depreciation and amortization shown separately below)	<u>2,736,034</u>	<u>1,081,641</u>
Gross profit	<u>8,516,520</u>	<u>2,710,620</u>
<i>Gross margin</i>	76%	71%
<b>Operating expenses:</b>		
General and administrative	16,236,456	9,272,890
Sales and marketing	2,310,743	1,163,239
Depreciation and amortization expense	<u>751,228</u>	<u>610,673</u>
Total operating expenses	<u>19,298,427</u>	<u>11,046,802</u>
Operating loss	(10,781,907)	(8,336,182)
<b>Non-operating income (expenses):</b>		
Interest expense and other	<u>(177,085)</u>	<u>(102,974)</u>
<b>Net loss</b>	<b><u>(10,958,992)</u></b>	<b><u>(8,439,156)</u></b>
Preferred stock accretion	<u>(1,000,000)</u>	<u>(1,000,000)</u>
Net loss attributable to common stockholders	<u>\$ (11,958,992)</u>	<u>\$ (9,439,156)</u>
Net loss per share attributable to common stockholders (basic and diluted)	<u>\$ (0.32)</u>	<u>\$ (0.27)</u>
Weighted average number of shares of Common Stock outstanding (basic and diluted)	<u>36,993,839</u>	<u>34,644,459</u>

# Capitalization

**Vivos Therapeutics, Inc.**  
**Capitalization including dilutive instruments**  
**As of January 31, 2020**

Series A Preferred Shares	1,000,000
Preferred Stock Redeemed	<u>300,000</u>
January 31, 2020 Balance	<u>700,000</u>
Series B Preferred Unit (in \$)	\$ 125,010



## Common Stock

	Outstanding Stock	Gross Proceeds	Price of Stock Issued
<b>2016</b>			
Initial Founders for Cash	2,500,000	\$ 250	
Founders by Share Exchange/Merger	20,000,000	\$ 4,344,045	
Seed Round One @ \$.50/share - \$1,000,000	2,000,000	\$ 1,000,000	\$ 0.50
December 31, 2016 Balance	<u>24,500,000</u>	<u>\$ 5,344,295</u>	
<b>2017</b>			
Sold During 2017	7,525,866	\$ 3,750,433	\$ 0.50
Stock-based compensation expense and warrants issued		\$ 127,246	
Consultants for services	<u>825,000</u>	<u>\$ 412,500</u>	\$ 0.50
December 31, 2017 Balance	<u>32,850,866</u>	<u>\$ 9,634,474</u>	
<b>2018</b>			
\$.50 Raises	58,332	\$ 29,166	\$ 0.50
\$1.50 Raises	749,999	\$ 1,124,998	\$ 1.50
\$2.50 Raises	2,019,827	\$ 5,049,568	\$ 2.50
Exercise of warrants	68,750	\$ 91,463	\$ 1.33
Consultants for services	175,000	\$ 287,500	\$ 1.64
Acquisition of Business	280,000	\$ 700,000	\$ 2.50
Stock-based compensation expense/Other		\$ 433,156	
December 31, 2018 Balance	<u>36,202,774</u>	<u>\$ 17,350,325</u>	
<b>2019</b>			
\$2.50 Raises	467,308	\$ 1,165,999	\$ 2.50
Exercise of Options	150,000	\$ 82,500	\$ 0.55
Conversion of Debt	379,554	\$ 250,475	\$ 0.66
Conversion of Shareholder Note	132,858	\$ 498,218	\$ 3.75
Stock-based compensation expense		\$ 987,276	
December 31, 2019 outstanding common stock	<u>37,332,494</u>	<u>\$ 20,334,792</u>	
<b>2020</b>			
January 31, 2020 outstanding common stock	<u>37,332,494</u>	<u>\$ 20,334,792</u>	
<b>Dilutive Securities</b>			
Common Stock Options Outstanding	5,700,000	Various exercise prices from \$ 0.50 to \$2.50	
Common Stock Warrants Outstanding	250,000	at \$0.50	
Convertible Debt Outstanding on an as converted basis at \$2.50	1,473,814		
Fully Diluted Preferred and Common Stock at January 31, 2020	<u>45,456,308</u>		

## Vivos is Strongly Positioned

- ✓ FDA clearances and registrations since 2014
- ✓ More than 14,000 patients treated
- ✓ 1,300 trained Vivos Dentists across 38 States
- ✓ Evidence of safety and published research report of 5-year long-term sustained efficacy
- ✓ Differentiated products built on years of development
- ✓ 8 US Patents, 2 Canadian Patents, 1 EU Patent
- ✓ Significant body of clinical evidence across 50 published studies
- ✓ Can reduce or possibly eliminate the need for surgery or lifetime CPAP or mandibular advancement oral therapy





R. Kirk Huntsman is a company founder and has served as a director and CEO of Vivos since September 2016. Mr. Huntsman brings over 30 years experience as a successful entrepreneur and senior executive in the dental industry. In 1995, he founded Dental One Partners, a leading dental support organization (DSO) with over 165 dental offices across 15 states, which was sold to a private equity firm in 2008. He was later appointed as CEO of ReachOut Healthcare America, a Morgan Stanley Private Equity portfolio company serving over 1,000,000 underprivileged pediatric patients across 29 states. He has also been a trusted consultant to a number of private equity firms and various DSOs around the United States, advising them on dental industry dynamics, strategy, target acquisitions, and operations. He was a founding member of the Dental Group Practice Association (DGPA), now known as the Association of Dental Support Organizations (ADSO). He is the author of numerous articles and two books on the business of dentistry. Mr. Huntsman holds a BS degree in finance from the Marriott School of Business at Brigham Young University.



Professor G. Dave Singh DMD PhD DDS is the Founder of the company and has served as Chief Medical Officer and director since September 2016. Dr. Singh is one of the world's top 100 doctors on issues pertaining to Sleep Disordered Breathing (SDB). He has published over 45 articles and studies in professional, peer-reviewed journals pertaining to the Vivos System technology. His pioneering work on epigenetic craniofacial growth led to the development of the patented DNA appliance® and mRNA appliance® technology. From 2008 through 2016, Dr. Singh served as the founder and CEO of BioModeling Solutions, Inc. He holds three doctorates including a DDS in orthodontics from University of Dundee, UK, a Ph.D. in craniofacial development from University of Bristol, UK, and a DMD in dentistry from University of Newcastle, UK validated at the Center for Craniofacial Disorders, University of Puerto Rico, USA. He has been awarded prizes at the International Association for Orthodontics (2005, 2013, and 2014), as well as by the US Invisible Disabilities Association (2019). This year he achieved a lifetime achievement award for his work on sleep apnea.



Brad Amman has served as the Chief Financial Officer of Vivos Therapeutics, Inc., beginning October 2018. From January 2017 to October 2018, Mr. Amman served as the Chief Financial Officer and Chief Operations Officer of InLight Medical, a manufacturer and distributor of medical devices cleared by the FDA for increased circulation and reduced pain. Prior to InLight, served as CereScan Corp.'s Chief Financial Officer. CereScan specializes in state-of-the-art functional brain imaging, utilizing a patented process, the latest generation functional imaging SPECT and PET cameras and the industry's leading brain imaging software to assist in the diagnosis of a magnitude of brain-related conditions and disorders. Mr. Amman served as Chief Financial of LifeVantage Corporation and worked with the SEC through the registration process, with LifeVantage successfully becoming listed on the NASDAQ. Mr. Amman holds a Masters of Business Administration from the University of Notre Dame and a BS in Accounting from the University of Denver.



Susan McCullough is a company founder and has served as the Senior Vice President of Operations of Vivos Therapeutics, Inc. since September 2016. Her 30-year career as a top national consultant and senior executive in the dental field, along with several years dedicated to dental sleep management and integration, have prepared her well for her current leadership role in Operations. Ms. McCullough is largely responsible for the creation and staffing of the Institute for Craniofacial Sleep Medicine and personally wrote large portions of the curriculum. She currently has charge of the Institute, manufacturing / production, information systems, and sales. Prior to co-founding Vivos, she was the Director of Practice Development for Dental One Partners with over 165 dental offices across the United States. From August 1998 to May 2002 attended Hubbard College and received a WISE Consulting License.



D. Bryan Ferre has served as SVP of Marketing of Vivos Therapeutics, Inc., since September 2017. His career as a senior marketing and brand management executive spans more than two decades. He has received recognition from clients and peers including HOW Magazine, Communication Arts, and The Art Director's Club of Washington DC. His work and influence has been used by global brands including Verizon®, Intel®, Iomega®, Nokia®, and The Kennedy Center for the Arts®. His broad experience spans several roles as Chief Marketing Officer, Creative Director and Vice President of Sales, and he has served more than five hundred SMB's around the world. In May 2008, Bryan co-founded and served as CEO of Zipadi Technologies which provided a platform-as-a-service offering to enable small and medium-sized companies to create and manage their brand more effectively across multiple digital channels including online and the emerging mobile channels. Mr. Ferre holds a degree in Graphic Design and Corporate Communications.



Cathryn H. Bonar has served as Chief Regulatory and Compliance Officer of Vivos Therapeutics, Inc., since January 2017. From July 2014 until January 2017, Ms. Bonar had served as Owner and Director of Reimbursity Medical Billing Services, Inc., which created and implemented a medical billing process and protocol for billing medical insurance for Dentists and Oral Surgeons across the country. From 2010 to 2014, she had served as a partner and director of Medical EZ Billing. Ms. Bonar is regarded as an expert in medical billing for the dental practice and has been featured in various professional periodicals for her work. She has also lectured at various dental conventions on medical billing for continuing education. She has developed and maintains company compliance operating procedures, quality record management and regulatory processes. She has become an invaluable resource to Vivos Therapeutic by successfully working directly with the FDA and procuring device clearances and IRB clinical trials throughout the country. Ms. Bonar holds a Bachelor of Science from Liberty University.



Edward Loew has served as SVP of Vivos Therapeutics, Inc., since September 2017. From April 2011 to January 2016, he served as President and CEO of Veebo, Inc., a National mobile marketing company. From January 2011 to February 2012, he served as Chief Investment Officer of Amerifunds Diversified Funding, LLC a national real estate note purchasing firm. From March 2002 to December 2007 Mr. Loew served as Director of Lending, Corporate Officer and member of the Investment Committee of Investors Mortgage Holdings, Inc., the manager of a privately held, publicly reporting \$1.2 billion real estate portfolio. Mr. Loew has been featured in USA Today and Popular Science Radio. Mr. Loew brings senior-level program implementation and strategic skills relative to multi-tiered operational environments. Mr. Loew holds a BA in Political Science from Arizona State University.



**Cody Teets**

Board Chair

Cody Teets has served as a director and as the Chairman of our Board of Directors since April 2019. Since January 2017, Ms. Teets has served as independent consultant for private equity firms, universities, and small businesses. Prior to that, from 2001 to 2017, she held multiple officer roles at McDonald's Corporation, where she served as an operations executive with responsibilities including full oversight and accountability for an 800 restaurant multi-state market.



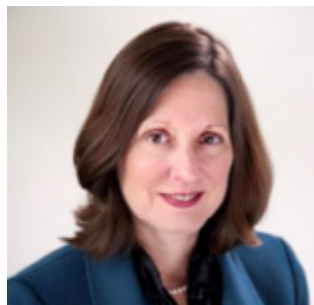
**R. Kirk Huntsman**

R. Kirk Huntsman has served as our Chief Executive Officer and a director since September 2016. In 1995 he founded Dental One (now Dental One Partners), which, as President and Chief Executive Officer he grew to become one of the leading DSOs (dental service organizations) in the country, with over 165 practices in 15 states. After a successful sale of Dental One to MSD Capital in 2008 and subsequent merger in 2009 with Dental Care Partners, Mr. Huntsman was appointed in 2010 as Chief Executive Officer of ReachOut Healthcare America, a Morgan Stanley Private Equity portfolio company.



**Dr. Dave Singh**

G. Dave Singh, DMD, Ph.D., DDS, has served as our President, Chief Medical Officer and as a director since September 2016. Since January 2008, Dr. Singh has also served as the Chief Executive Officer of BioModeling Solutions, Inc., which is now our wholly owned subsidiary. Dr. Singh is one of the leading researchers and professionals in the world on issues pertaining to SDB in all its many forms.



**Carol Coughlin**

Carol Coughlin is the Audit Committee Chair of Vivos Therapeutics and is an experienced public company board leader (board chair, audit committee chair) and is highly skilled in corporate governance, IPO and M&A for regulated companies. She is a qualified Financial Expert and a Board Leadership Fellow (NACD). In addition to Vivos, she serves on the boards of University of Maryland Medical Center (Finance Chair) and is Board Observer for Trusty Care. She is an accomplished healthcare CFO with a track record of achieving profitability through growth, highly successful turnarounds and M&A.



**Robert D. Mitchell**

Robert D. Mitchell currently is a member of the Board of Directors or advisor for the following companies: Euphrates Medical (Chairman of the Board), Amecath Holdings Inc. (Chairman of the Board), RVM Capital (Senior Advisor), i360 (Senior Advisor CCO) Globally recognized leader demonstrating consistent achievement encompassing a 30+ year career in the high-tech medical device space & fast-moving healthcare markets.

## Cautionary Note on Forward-Looking Statements

This presentation includes statements that constitute “forward-looking statements” within the meaning of the U.S. federal securities laws. These statements relate to future events or to our future performance, and involve significant known and unknown risks, uncertainties and other factors that may cause our actual results, levels of activity, performance, or achievements to be materially different from any future results, levels of activity, performance or achievements expressed or implied in these forward-looking statements. These statements include, but are not limited to, information or assumptions about our ability to formulate, implement and gain market acceptance of our business plan and our products and services, the viability of our intellectual property, our financing needs and plans, and our management’s plans, goals and objectives for future operations and growth. In some cases, you can identify forward-looking statements by the use of words such as “may,” “could,” “expect,” “intend,” “plan,” “seek,” “anticipate,” “believe,” “estimate,” “predict,” “project,” “continue,” or the negative of these terms or other comparable terminology. You should not place undue reliance on forward-looking statement since they involve significant known and unknown risks, uncertainties and other factors which are, in some cases, beyond our control and which could cause actual performance or results to differ materially from those expressed in or suggested by forward-looking statements.

Important factors that could cause such differences include, but are not limited to: (i) risks and uncertainties associated with the development and implementation of our VIP Program; (ii) our dependence on key members of our management team; (iii) the risk that we may be unable raise capital when needed; (iv) risks associated with the timing of, and our ability to achieve, predictable revenue growth and ultimately profitability, if at all; (v) the risk that we may be unable to gain market acceptance for the Vivos System; and (vi) risks associated with maintaining or protecting the validity of patents and other intellectual property.

Should one or more of these risks or uncertainties materialize, or should any of our assumptions prove incorrect, actual results may vary in material or even significant respects from those projected in these forward-looking statements. We do not undertake any obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, except as may be required under applicable securities laws. Sales, revenue and other economic estimates have been determined on the basis of market research and comparable product analysis, but no assurances can be given that such results will be achieved, if at all.

