FEI Number: 33-0807547			Certificate of Status Desired: No		
Name and Ac	Idress of Current Registered Agent:				
PLANTATION, FI	IE ISLAND ROAD	egistered office or re	igistered agent, or both, in the Sta	ate of Florida.	
SIGNATURE:	KIMBERLY LAUGHREY, ASST. SECRE	TARY		04/08/2024	
	Electronic Signature of Registered Agent			Date	
Authorized P	erson(s) Detail :				
Title	MEMBER	Title	SECRETARY		

Authorized Person(s) Detail :					
Title	MEMBER	Title	SECRETARY		
Name	HEALTH CATALYST, INC.	Name	ORENSTEIN, DANIEL		
Address	10897 SOUTH RIVER FRONT PARKWAY #300	Address	10897 SOUTH RIVER FRONT PARKWAY #300		
City-State-Zip:	SOUTH JORDAN UT 84095	City-State-Zip:	SOUTH JORDAN UT 84095		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL ORENSTEIN

Electronic Signature of Signing Authorized Person(s) Detail

red: No

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1800000567 Entity Name: MEDICITY LLC

Current Principal Place of Business:

10897 SOUTH RIVER FRONT PARKWAY #300 SOUTH JORDAN, UT 84095

Current Mailing Address:

10897 SOUTH RIVER FRONT PARKWAY #300 SOUTH JORDAN, UT 84095 US

FE

Na

04/08/2024

Date

FILED Apr 08, 2024 Secretary of State 6493183289CC

SECRETARY