**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 24, 2021**
**Secretary of State**
**2739349907CC**

DOCUMENT# F12000001087

**Entity Name:** OPTUM PHARMACY 801, INC.

**Current Principal Place of Business:**

24416 N. 19TH AVE.
PHOENIX, AZ 85085

**Current Mailing Address:**

24416 N. 19TH AVE.
PHOENIX, AZ 85085 US

**FEI Number: 13-4318552**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE:

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | |
|---|---|
| Title | DIRECTOR |
| Name | ZEGLINSKI, , MICHAEL GERARD |
| Address | 24416 N. 19TH AVE. |
| City-State-Zip: | PHOENIX AZ 85085 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | GROSKLAGS, JEFFREY DAVID |
| Address | 24416 N. 19TH AVE. |
| City-State-Zip: | PHOENIX AZ 85085 |

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|---|---|
| Title | ASSISTANT SECRETARY |
| Name | LANG, HEATHER ANASTASIA |
| Address | 24416 N. 19TH AVE. |
| City-State-Zip: | PHOENIX AZ 85085 |

| | |
|---|---|
| Title | TREASURER |
| Name | GILL, PETER MARSHALL |
| Address | 24416 N. 19TH AVE. |
| City-State-Zip: | PHOENIX AZ 85085 |

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|---|---|
| Title | SECRETARY |
| Name | PETERSON, KAREN ELIZABETH |
| Address | 24416 N. 19TH AVE. |
| City-State-Zip: | PHOENIX AZ 85085 |

| | |
|---|---|
| Title | PRESIDENT |
| Name | ZEGLINSKI, , MICHAEL GERARD |
| Address | 24416 N. 19TH AVE. |
| City-State-Zip: | PHOENIX AZ 85085 |

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: LANG, HEATHER ANASTASIA ASSISTANT SECRETARY 04/24/2021

Electronic Signature of Signing Officer/Director Detail — Date