

F17000001824

2017-04-21 12:57:08 EST

954208084 From Ranae McGraw

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H170001100533)))



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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614) 280-3338  
Fax Number : (954) 208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FOREIGN PROFIT/NONPROFIT CORPORATION  
HEALTH CATALYST, INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$1,170.00

2017 APR 21 PM 3:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APR 24 2017

17 APR 21 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Health Catalyst, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

Address

City/State and Zip code

[jason.alger@healthcatalyst.com](mailto:jason.alger@healthcatalyst.com)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at ( )

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Health Catalyst, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")  
  
Health Catalyst Florida, Inc.  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 45-3337483  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/20/2011 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)
6. 07/28/2013  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3165 E. Millrock Dr., Suite 400, Salt Lake City, UT 84121  
(Principal office address)  
  
same  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

## 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation, the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: 

(Registered agent's signature)

**Alfred Younan**  
**Assistant Secretary**

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**Chairman: SEE ATTACHMENTAddress: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_**B. OFFICERS**President: SEE ATTACHMENTAddress: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Daniel Orenstein

(Typed or printed name and capacity of person signing application)

**FILED**  
17 APR 21 AM 9:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "HEALTH CATALYST, INC." IS DULY  
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD  
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS  
OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE  
BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE  
BEEN PAID TO DATE.



5040221 8300

SR# 20172425882

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202359605

Date: 04-11-17

**ATTACHMENT  
TO  
REGISTRATION APPLICATION FOR  
HEALTH CATALYST, INC.**

**LIST OF DIRECTORS AND OFFICERS**

<b>Name</b>	<b>Title</b>	<b>Address</b>
Fraser Bullock	Director (Chairman)	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Michael Dixon	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Todd Cozzens	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Penny Wheeler	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Promod Haque	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Daniel D. Burton	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
John A. Kane	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Anita Pramoda	Director	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Daniel D. Burton	Chief Executive Officer and President	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Dan Strong	Chief Financial Officer	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Daniel Orenstein	Secretary and Sr. Vice President	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121
Jeff Jarvic	Vice President Finance	3165 E. Millrock Dr., Ste. 400 Salt Lake City, UT 84121

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