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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.

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FOREIGN PROFIT/NONPROFIT CORPORATION Optum Infusion Services 500, Inc.

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Docusign Envelope ID: EFEAF88E-993D-4356-892C-D96CE7867ADA APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	" "COMPANY." "CORPORATION."	
(If name unavails Delaware	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting by	isiness in Florida)
(State or country 11/09/2010	under the law of which it is incorporated)	(FEI number, if applic	able)
(Date upon filing	of incorporation) 5.	(Date of duration, if other than	rperpetual)3
	(SEE SECTIONS 607.1501 & 607.1 ed., Lenexa, KS 66219	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	715 P
	(Princi	pal office address)	
	(Current maili	ng address, if different)	>**
Name and <u>stree</u> Name:	t address of Florida registered agent: (P. C T Corporation System	O. Box <u>NOT</u> acceptable)	
	1200 South Pine Island Road		
fice Address:	Plantation,	, Florida	
fice Address:		(Zip code)	
fice Address:	(City)	(
iving been nam signated in this other agree to c	ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes	vice of process for the above stated coment as registered agent and agree relative to the proper and complete	to act in this capacit
Registered agiving been nam signated in this other agree to c ties, and I am J	ent's acceptance: ed us registered agent and to accept serv application, I hereby accept the appoint	vice of process for the above stated coment as registered agent and agree relative to the proper and complete of my position as registered agent.	to act in this capacit,

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.

A. DIRECTORS

DocuSign Envelope ID: EF8AF88E-963D-4356-892C-D96CE7867ADA

i.l. Names and business addresses of officers and/or directors:

Chairman				
Address:			·	
				
Vice Chai	irman;			·
Address:				~~~~
	Jeffrey David Grosklags 1			
Director:				**************
Address:	11000 Optura Circle			
	Eden Prairie, MN 55344			
Director:	Michael Gerard Zeglinski V	• •	1923	
Address:	1600 McConnor Parkway		8	
	Schaumburg, IL 60173		<u></u>	
B. OFF	ICERS /	• • •	===	·
President;	Michael Gerard Zeglinski	•	- 	
	1600 McConnor Parkway			
Address:	Schaumburg, IL 60173	<u></u>		
	dent:			
Address:				
	Karen Elizabeth Peterson	~~~~)	
Secretary:	1600 McConnor Parkway, Schaumburg, IL 60173			
Address:	Peter Marshall Gill			
Treasurer:	9900 Bren Road East, Minnetonka, MN 55343			
Address:	270 Den 2000, 100 Den 2000			
NOTE: 7	track an addendum to the application listing additional officers	and/or dir	ectors.	
12.	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms the	·		,
are true ar a third de; Timos	nd that he or she is aware that false information submitted in a document to the Depar gree felony as provided for in \$.817.155, F.S. thy Joseph Langdon, Assistant Secretary	at the facts tment of St	stated hate cons	erein titutes
	(Typed or printed name and capacity of person signing application)			

Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida:

Optum Infusion Services 500, Inc.

Management Name	Title	Title Rol	(Address (Complete)
	Assistant Secretary	Officer	9900 Bren Road East, Minnetonka, Minnesota 55343
	Assistant Secretary		9900 Bren Road East, Minnetonka, Minnesota 55343
	Assistant Secretary	Officer	2300 Main Street, Irvine, California 92614

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "OPTUM INFUSION SERVICES 500, 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 FIFTEENTH DAY OF OCTOBER,

A.D. 2020.

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.

Authentication: 203868720

Date: 10-15-20