# F23000005418

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# FLORIDA DEPARTMENT OF STATE Division of Corporations

September 21, 2023

CSC

Please give original submission date as file date.

SUBJECT: KAISER FOUNDATION HEALTH PLAN OF WASHINGTON CORP. Ref. Number: W23000128936

We have received your document for KAISER FOUNDATION HEALTH PLAN OF WASHINGTON CORP. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY Regulatory Specialist II Supervisor

Letter Number: 523A00021834

1 SEP 21 PH 2:42

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION :

- - - - - - -

995002 4385155

. **. . . .** . . . . . . . .

COST LIMIT : \$ 70.00

- ORDER DATE : September 19, 2023
- ORDER TIME : 12:31 PM
- ORDER NO. : 995002-225
- CUSTOMER NO: 4385155

### FOREIGN FILINGS

NAME: KAISER FOUNDATION HEALTH PLAN OF WASHINGTON

XXXX QUALIFICATION (TYPE: NP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Kaiser Foundation Health Plan of Washington CorP.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

Kaiser Foundation Health Plan of Washington Corp.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2.	Washington	3. 91-0511770	
	(State or country under the law of which it is incorporated	)	(FEl number, if applicable)
4.	12/22/1945	5.	
	(Date of Incorporation)	(D:	ate of duration, if other than perpetual)

6.

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)

7 1300 SW 27th Street Renton, WA 98057

(Principal office street address)

(Current mailing address, if different)

8. Healthcare, Health Maintenance Organization in WA. The corporation has one or more employees who reside in and work

<ol> <li>9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)</li> </ol>				023 SEP	Ä
Name:	Corporation Service Company		· · ·	20	FIL
Office Address:	1201 Hays Street		, · · · · · · · · · · · · · · · · · · ·	×.	E C
	Tallahassee	, Florida <sup>32031</sup>		01 H	
	(City)	(Zip Code)		÷ F O	

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at 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.

Corporation Service Company Weiland-Jonnson, AUP XXX A By: (Registered agent's signature)

11. 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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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

# A. DIRECTORS

DChairman	Sec attache Name:	ed	Chairman	Name:	
Vice Chairman	Address:		□Vice Chairman	Address:	
Director			Director	<u> </u>	
President			□President		
□Vice President			□Vice President		
Secretary	01	Treasurer	Secretary		Treasurer
□Other:	0	Other:	□Other:		Other:
🗆 Chairman	Name:		Chairman	Name:	
□Vice Chairman	Address:		□Vice Chairman	Address:	
Director	<u> </u>		Director	·	
President			President		
□Vice President			□Vice President		
□Secretary	Ωr	freasurer	Secretary		
Other:		Other:	Other:		□Other:
CChairman	Name:		Chairman	Name:	
□Vice Chairman	Address:		□Vice Chairman	Address:	
Director	<u> </u>		Director		
□ President			DPresident		
□Vice President			□Vice President	<u> </u>	
	ÜΤ	reasurer			Treasurer
Other:	00	Other:	Other:		□Other:

NOTE: <u>Important Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

mil 13.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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14. Hong-Sze Yu, Assistant Secretary

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

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# KAISER FOUNDATION HEALTH PLAN OF WASHINGTON

Name	Title	Address
Kimberly K. Horn	Director, Chair of the Board	One Kaiser Plaza, Oakland, CA 94612
Ramón Francis Baez	Director	One Kaiser Plaza, Oakland, CA 94612
Andrew B. Bindman, MD	Director	One Kaiser Plaza, Oakland, CA 94612
Kim John Kaiser	Director	One Kaiser Plaza, Oakland, CA 94612
Kathryn Lee Lancaster	Director	One Kaiser Plaza, Oakland, CA 94612
Judith Ann Johansen	Director	One Kaiser Plaza, Oakland, CA 94612
Margaret Effie Porfido, JD	Director	One Kaiser Plaza, Oakland, CA 94612
Constance Williams Rice	Director	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Michael David Wilson	Director	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Gregory Andrew Adams	President & Chief Executive Officer	One Kaiser Plaza, Oakland, CA 94612
Janet Ann Liang	Executive Vice President, Group President and Chief Operating Officer, Care Delivery	One Kaiser Plaza, Oakland, CA 94612
Angela Mae Dowling	Regional President	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Thomas Ralph Meier	Senior Vice President & Treasurer	One Kaiser Plaza, Oakland, CA 94612
David Scott Thomason	Senior Vice President, Corporate Controller and Chief Accounting Officer	One Kaiser Plaza, Oakland, CA 94612
Todd Alan Hesse	Vice President for Marketing, Sales and Business Development	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Pamela Sheri Warren	Vice President, Health Plan Service and Administration	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Rebecca Marie Williams	Interim Chief Financial Officer	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Vanessa Marie Benavides	Secretary	One Kaiser Plaza, Oakland, CA 94612
Maryann Melonie Bodayle	Assistant Secretary	One Kaiser Plaza, Oakland, CA 94612
Shawna Marie Sweeney	Assistant Secretary	1300 SW 27 <sup>th</sup> St., Renton, WA 98057
Hong-Sze Andrew Yu	Assistant Secretary	One Kaiser Plaza, Oakland, CA 94612



I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

# **CERTIFICATE OF EXISTENCE**

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## KAISER FOUNDATION HEALTH PLAN OF WASHINGTON

**I CERTIFY** that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 12/22/1945.

**I FURTHER CERTIFY** that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

lssued Date: 09/20/2023 UBI Number: 578 011 461



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

the R Hohhre

Steve R. Hobbs, Secretary of State

Date Issued: 09/20/2023