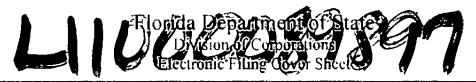
2/7/2020

Division of Corporations



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(((H20000044339 3)))



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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.

LLC REGISTERED AGENT CHANGE OPTUMCARE ACO FLORIDA, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ime of the limited liability company: OptumCare ACO	Florida, LLC	
2. (a)	JLD/SECGOVFIN	(b) JLD/SEC	GOVFIN
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2000 16TH STREET	601 HAW	All STREET
	DENVER, CO 80202	EL SEGUNDO, CA 90245	
	08/07/2011	L11000089	897
3.	Date of filing/registration in Florida	4.	Document number
5 (a)	CORPORATION SERVICE COMPANY		
5. (a) (b)	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of Stat	<u>-</u> е:
	Registered Office Address 1201 HAYS STREET	ADDRESS)	_
	TALLAHASSEE, FL	32301-2525	2020 FEB SECRETA
	C T Corporation System		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	ROFEB -7 AMII: 02 ORE INTO OF STATE ALLAH-ASSIEE, FL
	NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	
	1200 South Pine Island Road		- ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	Plantation	33324	_
the che agent was/withe articles Signa I here provis the object to mer notifie By:	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of itles of organization or the operating agreement of the belong the authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. It do not not not not not not not not not no	the registered office ability company, it is if the limited liability companied liability companies and act in this can	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Printed or typed name of signee