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01/31/2022

D	ate:	01/31/2022	
		Acc#I20160000	072
Name:	Healthp	lex America, LLC	
Document #:	i		
Order #:	1475080	00 - 1	
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Thank you!

COVER LETTER

TO:,	Amendment Section Division of Corporations	
SUBJE	CCT: Marlin Holding Company LLC	
		Name of Surviving Party
The end	closed Certificate of Merger and fee(s) are submitted for filing.
Please i	return all correspondence concerning	; this matter to:
	Sara Buesgens	
	Contact Person	
	UnitedHealth Group	, Inc.
	Firm/Company	
	9900 Bren Road East, Mi	N950-1000
	Address	
	Minnetonka, MN 5	5343
	City, State and Zip (Code
	sara.buesgens@uhg.	com
	E-mail address: (to be used for future	e annual report notification)
For furt	ther information concerning this matt	ter, please call:
Sara Bu	iesgens	at () 361-9552
	Name of Contact Person	Area Code Daytime Telephone Number
	Certified copy (optional) \$30.00	
	ET ADDRESS:	MAILING ADDRESS:
	ment Section	Amendment Section
	n of Corporations Building	Division of Corporations P. O. Box 6327
	xecutive Center Circle	Tallahassee, FL 32314
	issee, FL 32301	

CR2E080 (2/20)



February 1, 2023

CT CORP

SUBJECT: HEALTHPLEX AMERICA, LLC

Ref. Number: L18000249065

CORRECTED
Please Allow For Same File Date

We have received your document for HEALTHPLEX AMERICA, LLC and the authorization to debit your account in the amount of \$80.00. However, the document has not been filed and is being returned for the following:

As a condition of a merger, pursuant to s.605.0212(8) and/or s.607.1622 (8), Florida Statutes, each party to the merger must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the articles of merger are submitted for filing.

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) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 923A00002470

2023 FEB -7 PM 12: 4(

www.sunbiz.org

Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in acce with s. 605.1025, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

Name Healthplex America, LLC	<u>Jurisdiction</u> Florida	Form/Entity Type Limited Liability Company
Marlin Holding Company LLC	Delaware	Limited Liability Company
	·	
SECOND: The exact name, form/entity	type, and jurisdiction of the sur	viving party are as follows:
<u>Name</u>	Jurisdiction	Form/Entity Type
Marlin Holding Company LLC	Delaware	Limited Liability Company

<u>THIRD:</u> The merger was approved by each domestic merging entity that is a limited liability company in accordance v ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

2023 FEB - 7 AM II: 5

_ '	 This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public are attached. 						
_	This entity is created by the m	erger and is	a domestic filing e	ntity, the public organi	c record is attached	d.	
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limite liability partnership, its statement of qualification is attached.						
x	This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 4: Florida Statutes is:						
	Marlin Holding Company LLC c/o The Corporation Trust Company						
	1209 Orange Street						
	Wilmington, Delaware 19801						
Januar Note: as the o	1: If other than the date of filing fer the date this document is file y 31, 2023 If the date inserted in this block document's effective date on the NTH: Signature(s) for Each Pa	does not me	erida Department o	f State: tatutory filing requiren		I not be	
Name	of Entity/Organization:		Signature(s):		Name of Individual:		
Health _l	olex America, LLC				Heather A. Lang		
Martin	Holding Company LLC				Heather A. Lang		
Florida Non-Fl	rations: Il partnerships: Il Limited Partnerships: Iorida Limited Partnerships: Id Liability Companies:	(If no dire Signature Signatures Signature	ctors selected, sign	er)		
Fees:	For each Limited Liability Cor For each Limited Partnership: For each Other Business Entity		\$25.00 \$52.50 \$25.00	For each Corporati For each General I <u>Certified Copy (o</u>	Partnership:	\$35. \$25. \$30.	

FOURTH: Please check one of the boxes that apply to surviving entity: (if applicable)