2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2015
Secretary of State
CC7872758913

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Entity Name: MOUNT THIELSEN INPATIENT SERVICES, LLC

Current Principal Place of Business:

6200 S. SYRACUSE WAY STE 200
ATTN: LEGAL DEPT.
GREENWOOD VILLAGE, CO 80111

Current Mailing Address:

6200 S. SYRACUSE WAY STE 200
ATTN: LEGAL DEPT.
GREENWOOD VILLAGE, CO 80111

FEI Number: 00-0000000

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MBR
Name	FLORIDA IPS MEDICAL SERVICES, LLC
Address	6200 S. SYRACUSE WAY STE 200
City-State-Zip:	GREENWOOD VILLAGE CO 80111

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG A WILSON SECRETARY 04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date