

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002148

Entity Name: ACUMED LLC

Current Principal Place of Business:

5885 NE CORNELIUS PASS ROAD
HILLSBORO, OR 97124

Current Mailing Address:

5885 NE CORNELIUS PASS ROAD
HILLSBORO, OR 97124 US

FEI Number: 11-3660846

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: VIVIEN MITCHELL

01/31/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name COLSON MEDICAL, LLC
Address 181 W. MADISON ST
SUITE 4400
City-State-Zip: CHICAGO IL 60602

Title SECRETARY, CFO, VICE PRESIDENT
FINANCE
Name CAMERON, SCOTT
Address 5885 NE CORNELIUS PASS ROAD
City-State-Zip: HILLSBORO OR 97124

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: SCOTT CAMERON

SECRETARY

01/31/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date