2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2021
Secretary of State
7817487055CC

DOCUMENT# M04000003057

Entity Name: WELLPATH LLC

Current Principal Place of Business:

1283 MURFREESBORO PIKE
SUITE 500
NASHVILLE, TN 37217

Current Mailing Address:

1283 MURFREESBORO PIKE
SUITE 500
NASHVILLE, TN 37217 US

FEI Number: 32-0092573

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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	CEO	Title	SECRETARY
Name	DOMINICIS, JORGE	Name	GOLDSTONE, MARC
Address	1283 MURFREESBORO PIKE SUITE 500	Address	1283 MURFREESBORO PIKE SUITE 500
City-State-Zip:	NASHVILLE TN 37217	City-State-Zip:	NASHVILLE TN 37217
Title	PRESIDENT	Title	TREASURER
Name	HALLMAN, LOUIS	Name	PEREZ, JUAN
Address	1283 MURFREESBORO PIKE SUITE 500	Address	1283 MURFREESBORO PIKE SUITE 500
City-State-Zip:	NASHVILLE TN 37217	City-State-Zip:	NASHVILLE TN 37217
Title	MEMBER	Title	MEMBER
Name	WELLPATH GROUP HOLDINGS, LLC	Name	JESSAMINE HEALTHCARE, INC.
Address	1283 MURFREESBORO PIKE SUITE 500	Address	1283 MURFREESBORO PIKE SUITE 500
City-State-Zip:	NASHVILLE TN 37217	City-State-Zip:	NASHVILLE TN 37217

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: JEFF A WHITACRE PARALEGAL 01/18/2021

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