2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2025
Secretary of State
8086707913CC

DOCUMENT# M09000002970

Entity Name: GENOA HEALTHCARE LLC

Current Principal Place of Business:

707 SOUTH GRADY WAY
SUITE 400
RENTON, WA 98057

Current Mailing Address:

707 SOUTH GRADY WAY
SUITE 400
RENTON, WA 98057 US

FEI Number: 27-0556097

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
SUITE 4
PLANTATION, FL 33324 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	SECRETARY	Title	ASSISTANT SECRETARY
Name	BOHMER, KAREN ELIZABETH	Name	LANG, HEATHER ANASTASIA
Address	707 SOUTH GRADY WAY SUITE 400	Address	707 SOUTH GRADY WAY SUITE 400
City-State-Zip:	RENTON WA 98057	City-State-Zip:	RENTON WA 98057
Title	MANAGER	Title	MANAGER
Name	STIDMAN, CHRISTOPHER JOSEPH	Name	GUSTIN, TODD VINCENT
Address	707 SOUTH GRADY WAY SUITE 400	Address	707 SOUTH GRADY WAY SUITE 400
City-State-Zip:	RENTON WA 98057	City-State-Zip:	RENTON WA 98057
Title	PRESIDENT	Title	CEO
Name	GUSTIN, TODD VINCENT	Name	GUSTIN, TODD VINCENT
Address	707 SOUTH GRADY WAY SUITE 400	Address	707 SOUTH GRADY WAY SUITE 400
City-State-Zip:	RENTON WA 98057	City-State-Zip:	RENTON WA 98057
Title	TREASURER		
Name	HIRSCH, MARILYN VICTORIA		
Address	707 SOUTH GRADY WAY SUITE 400		
City-State-Zip:	RENTON WA 98057		

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: HEATHER ANASTASIA LANG ASSISTANT SECRETARY 03/22/2025

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