2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2024
Secretary of State
4041326456CC

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Entity Name: FIRSTSOURCE HEALTH PLANS AND HEALTHCARE SERVICES, LLC

Current Principal Place of Business:

10400 LINN STATION ROAD
SUITE 100
LOUISVILLE, KY 40223

Current Mailing Address:

10400 LINN STATION ROAD
SUITE 100
LOUISVILLE, KY 40223 US

FEI Number: 90-0733044

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	MANAGER	Title	MANAGER
Name	VANDALI, VENKATAGIRI	Name	MITRA, ARJUN
Address	10400 LINN STATION ROAD SUITE 100	Address	10400 LINN STATION ROAD SUITE 100
City-State-Zip:	LOUISVILLE KY 40223	City-State-Zip:	LOUISVILLE KY 40223

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: VENKATAGIRI VANDALI PRESIDENT 04/18/2024

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