2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2015
Secretary of State
CC1962472748

DOCUMENT# M12000006803

Entity Name: INVACARE OUTCOMES MANAGEMENT LLC

Current Principal Place of Business:

ONE INVACARE WAY
ELYRIA, OH 44036

Current Mailing Address:

ONE INVACARE WAY
ELYRIA, OH 44036 US

FEI Number: 46-1743287

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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	MEMBER
Name	INVACARE CONTINUING CARE, INC.
Address	ONE INVACARE WAY
City-State-Zip:	ELYRIA OH 44036

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: INVACARE CONTINUING CARE, INC. MEMBER 04/15/2015

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