

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000004178

Entity Name: APRIA HEALTHCARE LLC**Current Principal Place of Business:**7353 COMPANY DRIVE
INDIANAPOLIS, IN 46237**Current Mailing Address:**7353 COMPANY DRIVE
INDIANAPOLIS, IN 46237 US**FEI Number:** 33-0057155**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
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	CEO, DIR
Name	STARCK, DANIEL J.
Address	7353 COMPANY DRIVE
City-State-Zip:	INDIANAPOLIS IN 46237

Title	EVP, SEC
Name	HICKS, MICHAEL-BRYANT .
Address	7353 COMPANY DRIVE
City-State-Zip:	INDIANAPOLIS IN 46237

Title	EVP, CFO
Name	MORRIS, DEBRA L
Address	26220 ENTERPRISE COURT
City-State-Zip:	LAKE FOREST CA 92630

Title	SOLE MEMBER
Name	APRIA HEALTHCARE GROUP LLC
Address	7353 COMPANY DRIVE
City-State-Zip:	INDIANAPOLIS IN 46237

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: MICHAEL-BRYANT HICKS

EVP, GC, SECRETARY

03/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date