

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000005960

Entity Name: PHI HEALTH, LLC**Current Principal Place of Business:**2800 N. 44TH STREET
SUITE 800
PHOENIX, AZ 85008**Current Mailing Address:**2800 N. 44TH STREET
SUITE 800
PHOENIX, AZ 85008 US**FEI Number:** 72-1404705**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 MANAGER
Name MASCARENHAS, MARK C. JR.
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title MANAGER
Name TAMBURRINO, ROBERT
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title MANAGER
Name TREADWAY, DAVID
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title TREASURER
Name MASCARENHAS, MARK C. JR.
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title SECRETARY
Name ROME, RICHARD
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title VP
Name WHITLEY, JASON
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title CHAIRMAN OF THE BOARD
Name TAMBURRINO, ROBERT
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

Title PRESIDENT
Name MOTZKIN, DAVID S.
Address 2800 N. 44TH STREET
SUITE 800
City-State-Zip: PHOENIX AZ 85008

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: RICHARD ROME**SECRETARY****04/18/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date