2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2025
Secretary of State
2774738309CC

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Entity Name: OPTUMCARE FLORIDA CI, LLC

Current Principal Place of Business:

2000 16TH STREET
JLD/SECGOVFIN.
DENVER, CO 80202

Current Mailing Address:

2000 16TH STREET
JLD/SECGOVFIN.
DENVER, CO 80202 US

FEI Number: 82-2227280

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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	Title	CEO
Name	COMSTOCK, TROY M.D.	Name	COMSTOCK, TROY M.D.
Address	2000 16TH STREET JLD/SECGOVFIN.	Address	2000 16TH STREET JLD/SECGOVFIN.
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202
Title	CFO	Title	SECRETARY
Name	ZIMMERMAN, JOSEPH ANTHONY	Name	LIETHEN, JOHN GEORGE
Address	2000 16TH STREET JLD/SECGOVFIN.	Address	2000 16TH STREET JLD/SECGOVFIN.
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202
Title	ASSISTANT SECRETARY	Title	CHIEF MEDICAL DIRECTOR
Name	LANG, HEATHER ANASTASIA	Name	ALLEN, BARBARA L. M.D.
Address	2000 16TH STREET JLD/SECGOVFIN.	Address	2000 16TH STREET JLD/SECGOVFIN.
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202
Title	COO	Title	TREASURER
Name	FITZPATRICK, BRIDGET	Name	HIRSCH, MARILYN VICTORIA
Address	2000 16TH STREET JLD/SECGOVFIN.	Address	2000 16TH STREET JLD/SECGOVFIN.
City-State-Zip:	DENVER CO 80202	City-State-Zip:	DENVER CO 80202

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 03/26/2025

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