2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2025
Secretary of State
1661399045CC

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Entity Name: ORTHO2, LLC

Current Principal Place of Business:

1107 BUCKEYE AVE
AMES, IA 50010

Current Mailing Address:

1107 BUCKEYE AVE
AMES, IA 50010 US

FEI Number: 83-2696542

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 N CALHOUN ST, STE 4
TALLAHASSEE, FL 32301 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	PRESIDENT, MANAGER
Name	SCHMIDT , AMY
Address	1107 BUCKEYE AVE.
City-State-Zip:	AMES IA 50010

Title	VICE PRESIDENT EMERGING TECHNOLOGY
Name	SCHOLZ , CRAIG
Address	1107 BUCKEYE AVE
City-State-Zip:	AMES IA 50010

Title	CHAIRMAN OF THE BOARD
Name	SARGENT , DAN
Address	4008 COCHRANE PKWY
City-State-Zip:	AMES IA 50014

Title	MANAGER
Name	MURPHY, KELLY
Address	135 DURYEA RD.
City-State-Zip:	MELVILLE NY 11747

Title	VICE PRESIDENT OF OPERATIONS
Name	SCHUELKA , TODD
Address	1107 BUCKEYE AVE
City-State-Zip:	AMES IA 50010

Title	CHAIRMAN OF THE BOARD
Name	KELLNER , CHAD
Address	1107 BUCKEYE AVE
City-State-Zip:	AMES IA 50010

Title	TREASURER
Name	MAGNUSON , COREEN
Address	1107 BUCKEYE AVE
City-State-Zip:	AMES IA 50010

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: COREEN MAGNUSON TREASURER 04/16/2025

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