

No. C 188314		Due no later than Aug 31, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. OPTUMHEALTH FINANCIAL SERVICES, INC. 11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	DEBORAH ANNE CULHANE	100 QUANNAPOWITT PKWY STE 405, MA023-1000	WAKEFIELD	MA	USA	01880	
SECRETARY	JOHN M. CONKLIN	2525 LAKE PARK BOULEVARD	WEST VALLEY CITY	UT	USA	84120	
TREASURER	ROBERT WORTH OBERRENDER	9900 BREN ROAD EAST	MINNETONKA	MN	USA	55343	
DIRECTOR	MICHAEL ERIC WEISSEL	1325 BOYLSTON STREET 11TH FLOOR	BOSTON	MA	USA	02215	
DIRECTOR	NATASHA SALIJ DECKMANN	ONE PENN PLAZA FL 8 NY036-1000	NEW YORK	NY	USA	10119	
DIRECTOR	JOEL RICHARD COSTA	11000 OPTUM CIRCLE	EDEN PRAIRIE	MN	USA	55344	
5. Organized Under the Laws of: DE C 188314		6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann					
		Date: 07/06/2017 Title: POA					
Processed 07/06/2017		* Electronically provided signatures are accepted as original signatures.					