







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00 For Office Use Only

-FILED-

File #: 0004575593

Date Filed: 1/19/2022 10:53:07 AM

| Entity Name and Mailing Address: | | | | |
|---|------------------------------|--------------|---|--|
| Entity Name: | | | SURGICAL CARE AFFILIATES, LLC | |
| Foreign Name (name in home jurisdiction): | | | SURGICAL CARE AFFILIATES, LLC | |
| The file number of this entity on the records of the Idaho Secretary of State is: | | | 0000310092 | |
| Address | | | 569 BROOKWOOD VLG STE 901 BIRMINGHAM, AL 35209-4513 | |
| Entity Details: | | | | |
| Entity Status | | | Active-Existing | |
| This entity is organized under the laws of: | | | DELAWARE | |
| If applicable, the old file number of Idaho Secretary of State was: | of this entity on the re | cords of the | W100257 | |
| The registered agent on record is: | | | | |
| Registered Agent | | | CT CORPORATION SYSTEM | |
| | | | Commercial Registered Agent Physical Address | |
| | | | 921 S ORCHARD ST | |
| | | | STE G | |
| | | | BOISE, ID 83705 | |
| | | | Mailing Address | |
| | | | 921 S ORCHARD ST | |
| | | | STE G BOISE, ID 83705 | |
| Agent or Address Change | | | | |
| Select if you are appointing a | new agent. | | | |
| Limited Liability Company Managers and M | embers | | | |
| Name | Title | | Business Address | |
| Mark John Flakne | Manager | | OKWOOD VILLAGE, SUITE 901 HAM, AL 35209 | |
| Caitlin Rich Zulla | Manager | | OKWOOD VILLAGE, SUITE 901 HAM, AL 35209 | |
| The annual report must be signed by an aut Job Title: Power of Attorney | horized signer of the entity | <i>1</i> . | | |
| The rest of Attention | | | | |
| Kelly Lettmann | | | 01/19/2022 | |
| Sign Here | | | Date | |