







STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

1500 11th Street Sacramento, California 95814 (916) 657-5448

For Office Use Only

-FILED-

File No.: BA20242224987 Date Filed: 12/19/2024

Entity Details	
Limited Liability Company Name	Summit Pharmacy Solutions, LLC
Entity No.	202464819202
Formed In	CALIFORNIA
Street Address of Principal Office of LLC	
Principal Address	9090 IRVINE CENTER DR IRVINE, CA 92618
Mailing Address of LLC	
Mailing Address	9090 IRVINE CENTER DR IRVINE, CA 92618
Attention	
Street Address of California Office of LLC	
Street Address of California Office	None
Manager(s) or Member(s)	
Manager or Member Name	Manager or Member Address
+ KM Health Solutions, Inc.	9090 IRVINE CENTER DR IRVINE, CA 92618
Agent for Service of Process	
Agent Name	Patrick Potives
Agent Address	9090 IRVINE CENTER DR IRVINE, CA 92618
Type of Business	
Type of Business	Pharmacy
Email Notifications	
Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Chief Executive Officer (CEO)	
CEO Name	CEO Address
N	one Entered

Labor Judgment

No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature		
By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.		
Patrick Potives	12/19/2024	
Signature	Date	