







STATE OF CALIFORNIA Office of the Secretary of State ARTICLES OF ORGANIZATION CA LIMITED LIABILITY COMPANY

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: 202463817604 Date Filed: 9/16/2024

| Limited Liability Company Name | Providers Revenues Solutions LLC |
|--|---|
| Initial Street Address of Principal Office of LLC | |
| Principal Address | 2108 N ST STE N SACRAMENTO, CA 95816 |
| Initial Mailing Address of LLC | |
| Mailing Address | 2108 N ST STE N SACRAMENTO, CA 95816 |
| Attention | |
| Agent for Service of Process | |
| California Registered Corporate Agent (1505) | NORTHWEST REGISTERED AGENT, INC. Registered Corporate 1505 Agent |
| | gage in any lawful act or activity for which a limited liability vised Uniform Limited Liability Company Act. |
| | |
| Management Structure | <u> </u> |
| | All LLC Member(s) |
| Management Structure The LLC will be managed by | <u> </u> |
| Management Structure The LLC will be managed by Additional information and signatures set forth on at | All LLC Member(s) |
| Management Structure The LLC will be managed by Additional information and signatures set forth on at made part of this filing. Electronic Signature | All LLC Member(s) |
| Management Structure The LLC will be managed by Additional information and signatures set forth on at made part of this filing. Electronic Signature By signing, I affirm under penalty of perjury that the | All LLC Member(s) tached pages, if any, are incorporated herein by reference and |