Secretary of State

Application to Register a Foreign Limited Liability Company (LLC)

LLC-5 For Office Use Only

-FILED-

File No.: 202465014432 Date Filed: 12/17/2024

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the

California Franchise Tax Board each year. For more information, go to https://www.ftb.ca.gov/ .		This Space For Offic	This Space For Office Use Only		
1a. LLC Name (Enter the exact name of the LLC as listed on your attached	Certificate of Good \$				
AHSC WCA LLC					
1b. California Alternate Name, If Required (Only enter an alternat	e name if the LLC ria	me in 1a not available in Californ	nia.)		
				 -	
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached C	Certificate of Good Sta	anding.)			
a. Jurisdiction (State, foreign country or place where this LLC is formed.)					
Delaw	are				
b. Authority Statement (Do not alter Authority Statement)		• • • •			
This LLC currently has powers and privileges to conduct busine	ess in the state, fo	oreign country or place ent	ered in Ite	m 2a.	
3. Business Addresses (Enter the complete business addresses. Iter	ns 3a and 3b cannot	be a P.O. Box or "in care of" an	individual or e	entity.)	
a. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbreviations)		e Zip Code	Zip Code	
161 Rosa L Parks Blvd	Nashville		I 37203	37203	
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box City (no abbreviations)		s) Stat	e Zip Code	e	
		CA	<u> </u>		
c. If the Mailing Address is the same as item 3a or 3b, check the applicable box:	7 3a □3b				
d. Mailing Address - if different than item 3a or 3b	City (no abbreviations) State Zip Cod		9		
4. Service of Process (Must provide either Individual OR Corporation.)					
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's full r	name and California s	treet address.			
a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name		Suffix	
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviation	s) Stat	e Zin Cod	Zip Code	
,	,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
CORPORATION - Complete Item 4c only. Only include the name of the r	egistered agent Corp		<u> </u>		
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not					
Corporation Service Company Which Will Do Business In Califor			3		
5. Read and Sign Below (Title not required.)		·			
By signing, I affirm under penalty of perjury that the information on behalf of the foreign LLC.	herein is true and	l correct and that I am aut	horized to	sign	

Tim Horton Type and Print Name

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AHSC WCA LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE SIXTEENTH DAY OF DECEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AHSC WCA LLC"

WAS FORMED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



Authentication: 205151929

Date: 12-16-24