

**STATE OF CALIFORNIA** 

Office of the Secretary of State

STATEMENT OF INFORMATION

## BA20241598849

For Office Use Only



| CLIFORN C   | LIMITED LIABILITY COMPAN<br>California Secretary of State<br>1500 11th Street<br>Sacramento, California 95814<br>(916) 657-5448 | <b>Y</b><br>File No.: BA20241598849<br>Date Filed: 9/5/2024  |
|---|---|--|
| Entity Details  |   |  |
| Limited Liability Company Name  |   | CareLink Insurance Solutions LLC   |
| Entity No.  |   | 202463618187   |
| Formed In   |   | CALIFORNIA   |
| Street Address of Principal Office of LLC<br>Principal Address                    |   | 1870 TICE VALLEY BLVD<br>WALNUT CREEK, CA 94595  |
| Mailing Address of LLC<br>Mailing Address   |   | 1870 TICE VALLEY BLVD<br>WALNUT CREEK, CA 94595  |
| Attention   |   |  |
| Street Address of California Office of LLC<br>Street Address of California Office |   | 1870 TICE VALLEY BLVD<br>WALNUT CREEK, CA 94595  |
|   | ()  | WALNUT CREEK, CA 94595   |
| Manager(s) or Member(   |   | Manager of Manifest Address  |
| Manager or Member Name  |   | Manager or Member Address  |
| Nahla Saleh Ala   | lbbas   | 1870 TICE VALLEY BLVD<br>WALNUT CREEK, CA 94595  |
| Agent for Service of Pro  | 00855   |  |
| Agent Name  |   | Nahla Saleh Alabbas  |
| Agent Address   |   | 1870 TICE VALLEY BLVD<br>WALNUT CREEK, CA 94595  |
| Type of Business  |   |  |
| Type of Business  |   | Advice to Medicare beneficiaries on insurance plan   |
| Email Notifications   |   |  |
| Opt-in Email Notifications  |   | No, I do NOT want to receive entity notifications via email.<br>prefer notifications by USPS mail. |
| Chief Executive Officer   | (CEO)   |  |
| CEO Name  |   | CEO Address  |
|   |   |  |

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. |            |  |  |
| Nahla Saleh Alabbas   | 09/05/2024 |  |  |
| Signature   | Date       |  |  |
|   |            |  |  |
|   |            |  |  |