



BA20250402944



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**CORPORATION**

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

For Office Use Only

**-FILED-**

File No.: BA20250402944

Date Filed: 2/26/2025

B3476-3614 02/26/2025 10:34 AM Received by California Secretary of State

## Entity Details

Corporation Name WELLSPRING HEALTH, A MEDICAL CORPORATION  
Entity No. 6598029  
Formed In CALIFORNIA

## Street Address of Principal Office of Corporation

Principal Address 13061 ROSEDALE HIGHWAY  
SUITE G-523  
BAKERSFIELD, CA 93314

## Mailing Address of Corporation

Mailing Address 13061 ROSEDALE HIGHWAY  
SUITE G-523  
BAKERSFIELD, CA 93314

Attention

## Street Address of California Office of Corporation

Street Address of California Office 13061 ROSEDALE HIGHWAY  
SUITE G-523  
BAKERSFIELD, CA 93314

## Officers

Officer Name	Officer Address	Position(s)
+ Htoo Kyaw MD	13061 ROSEDALE HIGHWAY SUITE G-523 BAKERSFIELD, CA 93314	Chief Executive Officer
+ Aye T Lin MD	13061 ROSEDALE HIGHWAY SUITE G-523 BAKERSFIELD, CA 93314	Chief Financial Officer, Secretary

## Additional Officers

Officer Name	Officer Address	Position	Stated Position
None Entered			

## Directors

Director Name	Director Address
+ Htoo Kyaw MD	13061 ROSEDALE HIGHWAY SUITE G-523 BAKERSFIELD, CA 93314
+ Aye T Lin MD	13061 ROSEDALE HIGHWAY SUITE G-523 BAKERSFIELD, CA 93314

The number of vacancies on Board of Directors is: 0

## Agent for Service of Process

Agent Name HTOO KYAW M.D.

Agent Address	13061 ROSEDALE HIGHWAY SUITE G-523 BAKERSFIELD, CA 93314
Type of Business	Medical Practice
Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Labor Judgment	No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.
Electronic Signature	<input checked="" type="checkbox"/> By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.
<u>Htoo Kyaw, MD</u> Signature	<u>02/26/2025</u> Date