AMENDED ANNUAL REPORT



E-FILED

Sep 12, 2019

OREGON SECRETARY OF STATE

REGISTRY NUMBER

97036199

REGISTRATION DATE

10/11/2013

BUSINESS NAME

OPTUM360, LLC

BUSINESS ACTIVITY

HEALTHCARE DATA & CONSULTING SERVICES

MAILING ADDRESS

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA

TYPE

FOREIGN LIMITED LIABILITY COMPANY

PRIMARY PLACE OF BUSINESS

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA

JURISDICTION

DELAWARE

REGISTERED AGENT

329227 - C T CORPORATION SYSTEM

780 COMMERCIAL ST SE STE 100

SALEM OR 97301 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

MANAGER

PETER G HANELT

13625 TECHNOLOGY DRIVE EDEN PRAIRIE MN 55344 USA

MANAGER

DANIEL JOSEPH SCHUMACHER

9700 HEALTH CARE LANE MINNETONKA MN 55343 USA

MANAGER

RICHARD T MILLER

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA

MANAGER

WYATT W DECKER MD

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA

MANAGER

ERIC DREW MURPHY

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA

MANAGER

LISA ZUCKERMAN

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA

MANAGER

TIMOTHY ALAN WICKS

11000 OPTUM CIRCLE EDEN PRAIRIE MN 55344 USA



OREGON SECRETARY OF STATE

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, managers, members or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

KELLY LETTMANN

TITLE

POA

DATE SIGNED

09-12-2019