

Exhibit 11d: HCMO-1b: Business Entities Form

Health Care Market Oversight (HCMO) Program

HCMO-1b: Business Entities Form

List all business entities associated with parties to the proposed material change transaction that are currently registered to operate in Oregon. Please add additional rows or pages as needed. Submit the completed form in a portable document form (pdf) to hcmo.info@oha.oregon.gov. This form will be published.

Definitions

“Business Name” refers to the legal business name as reported to the Internal Revenue Service.

“Assumed Business Name” has the meaning provided in ORS 648.005.

“Business Structure” refers to type of structure, such as a corporation, partnership, LLC, or other.

“Date Formed or Incorporated” refers to the date when the business entity was formed or incorporated.

“Jurisdiction” refers to the state of domestic registration.

“Principal Place of Business” is the physical street address where the business is located.

“FEIN” means the 9-digit federal tax identification number assigned by the Internal Revenue Service.

Business entities associated with Party A

Entity Name: Click or tap here to enter text.

Business Name	Assumed Business Name	Business Structure	Date Formed or Incorporated	Jurisdiction	Principal Place of Business	FEIN
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Business Name	Assumed Business Name	Business Structure	Date Formed or Incorporated	Jurisdiction	Principal Place of Business	FEIN
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Business entities associated with Party B

Entity Name: CerpassRx Holding Company

Business Name	Assumed Business Name	Business Structure	Date of Incorporation	Jurisdiction	Principal Place of Business	FEIN
Healthcare Highways Rx, LLC	CerpassRx	Limited liability company	08/09/2014	Texas	5904 Stone Creek Dr., Suite 120, The Colony, TX 75056	73-1700173
Nomi Pharma LLC	Click or tap here to enter text.	Limited liability company	12/17/2021	Delaware	898 N 1200 W Ste 201, Orem, UT 84057	87-4094440
Nomi Health, Inc.	Click or tap here to enter text.	Corporation	05/01/2019	Delaware	898 N 1200 W Ste 201, Orem, UT 84057	84-1905194
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
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Business Name	Assumed Business Name	Business Structure	Date of Incorporation	Jurisdiction	Principal Place of Business	FEIN
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Please add additional tables for other entities involved in the material change transaction that have associated business entities.

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