



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

-FILED-

File #: 0005444735

Date Filed: 10/13/2023 12:41:00 PM

1. The name of the entity is: HUNTSWORTH HEALTH CORPORATION
2. The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:

<input checked="" type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
<input type="checkbox"/> Other: _____ (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)	
4. Jurisdiction of formation: PENNSYLVANIA
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:
800 TOWNSHIP LINE ROAD, SUITE 300, YARDLEY, PA 19067
(Street Address)

(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:
800 TOWNSHIP LINE ROAD, SUITE 300, YARDLEY, PA 19067
(Street Address)

(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)
8. Name and street address of registered agent in Idaho:
Capitol Corporate Services, Inc. 1555 W Shoreline Dr Ste 100 Boise ID 83702
(Name and Address)
9. The name, capacity, and mailing address of at least one governor:

<u>IAN STEVENS</u>	<u>SECRETARY</u>	<u>300 VESEY STREET, 10TH FLOOR, NEW YORK, NY 10282</u>
(Name)	(Capacity)	(Address)
<u>ROB HENDERSON</u>	<u>TREASURER</u>	<u>800 TOWNSHIP LINE ROAD, SUITE 300, YARDLEY, PA 19067</u>
(Name)	(Capacity)	(Address)

Secretary of State use only

Typed Name: IAN STEVENS

Signature: _____

Capacity: SECRETARY

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T: 717-787-1057
dos.pa.gov/BusinessCharities

Regarding: Huntsworth Health Corporation
Request Type: Subsistence Certificate **Issuance Date:** October 11, 2023
Request No.: 023525819 **File No.:** 0000677515
Receipt No.: 000723543
Filing Type: Domestic Business Corporation
Filing Subtype: Business
Initial Filing Date: November 02, 1978
Status: Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

Huntsworth Health Corporation

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused the seal
of my office to be affixed, the day and year
above written

Albert Schmidt
Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov