



# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

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

For Office Use Only

**-FILED-**

File #: 0004273561

Date Filed: 5/4/2021 2:39:00 PM

1. The name of the entity is: HOSPITAL MANAGEMENT SERVICES, INC.
2. The name which it shall use in Idaho is: HOSPITAL MANAGEMENT SERVICES, INC.  
(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: CALIFORNIA  
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:  
2655 1ST STREET SUITE 200, SIMI VALLEY, CA 93065  
(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:  
2655 1ST STREET SUITE 200, SIMI VALLEY, CA 93065  
(Street Address)  
\_\_\_\_\_  
(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:  
177 S. ICEBERG LAKE AVENUE, MERIDIAN, ID 83642  
(Address)
8. Name and street address of registered agent in Idaho:  
JEFFREY N BROWN      177 S. ICEBERG LAKE AVENUE, MERIDIAN, ID 83642  
(Name and Address)
9. The name, capacity, and mailing address of at least one governor:  

<u>JEFFREY N BROWN</u>	<u>PRESIDENT</u>	<u>177 S. ICEBERG LAKE AVENUE, MERIDIAN, ID 83642</u>
(Name)	(Capacity)	(Address)
_____ (Name)	_____ (Capacity)	_____ (Address)

Secretary of State use only

Typed Name: JEFFREY N. BROWN

Signature: \_\_\_\_\_

Capacity: PRESIDENT

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME:

HOSPITAL MANAGEMENT SERVICES, INC.

FILE NUMBER: C0796271  
FORMATION DATE: 05/27/1977  
TYPE: DOMESTIC CORPORATION  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, SHIRLEY N. WEBER, PH.D. Secretary of State of the State of California hereby certify:

The entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 27, 2021.

Shirley N. Weber, Ph.D.  
Secretary of State