

# State of Idaho

Office of the Secretary of State

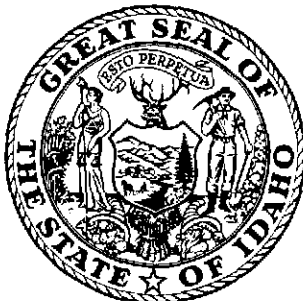
**CERTIFICATE OF REGISTRATION  
OF  
GEISINGER MEDICAL MANAGEMENT CORPORATION**

File Number C 207495

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: October 20, 2015



*Lawrence Denney*  
SECRETARY OF STATE

By *Shay Perdue*



# FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2015 OCT 20 PM 3:03

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the entity is: Geisinger Medical Management 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           |
- ☐ Other: \_\_\_\_\_  
(Use "Other" only if you wish to register under a name not listed above and enter the type here.)
4. Jurisdiction of formation: Pennsylvania  
(Specify the jurisdiction in which the entity was formed)
5. The address of its principal office is:  
100 N. Academy Ave., Danville, PA 17822  
(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:  
100 N. Academy Ave., Danville, PA 17822  
(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:  

|                               |  |
|-------------------------------|--|
| <u>C T Corporation System</u> | <u>921 S Orchard Street, Suite G, Boise, Idaho 83705</u> |
| (Name)                        | (Address)  |
9. The name, capacity, and mailing address of at least one governor:
 

|                                   |              |                                      |
|-----------------------------------|--------------|--------------------------------------|
| <u>David T. Feinberg, MD, MBA</u> | <u>Chair</u> | <u>100 N. Academy Ave., PA 17822</u> |
| (Name)                            | (Capacity)   | (Address)                            |
| <u>James Peters</u>               | <u>CEO</u>   | <u>100 N. Academy Ave., PA 17822</u> |
| (Name)                            | (Capacity)   | (Address)                            |

Typed Name: David Felicio

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

Capacity: Secretary

Secretary of State use only

IDAHO SECRETARY OF STATE

10/20/2015 05:00

CK: PREPAID CT: 278665 BH: 1497146  
1@ 100.00 = 100.00 FOR REG ST #2  
1@ 20.00 = 20.00 EXPEDITE C #3

C207495

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

10/16/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

GEISINGER MEDICAL MANAGEMENT CORPORATION

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the 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 the Secretary's  
Office to be affixed, the day and year above written

*Pedro A. Contes*  
Secretary of the commonwealth

Certification Number: TSC151016171529-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>