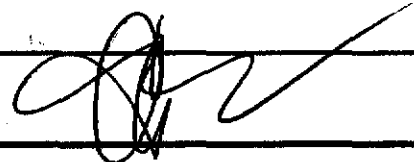


No. W 5645 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 05/06/2009 1. Mailing Address: Correct in this box if needed. INTERMOUNTAIN SURGERY CENTER, L.L.C. 600 N ROBBINS RD STE 401 BOISE ID 83702	2. Registered Agent and Office (NOT A P.O. BOX) PAULETTE M CARLSON 600 N ROBBINS RD STE 401 BOISE ID 83702 3. New Registered Agent Signature.														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td colspan="7" style="height: 150px; vertical-align: top; text-align: center;"> Please see attached. </td> </tr> </tbody> </table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Please see attached.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code										
Please see attached.																
5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 5645 </div>	6. <div style="display: flex; justify-content: space-between;"> <div> Signature:  <hr/> Name (type or print): Michael J. Curtin, MD </div> <div> Date: 5/12/09 <hr/> Title: 5/12/09 </div> </div>															
Issued 05/12/2009 by LJM																

Members

Office Held	Name	Street or PO Address	City	State	Zip
Medical Director	Michael Curtin, MD	600 N. Robbins Road	Boise	ID	83702
Member	Kirk A. Miller, MD	"	"	"	"
Member	Kevin G. Shea, MD	"	"	"	"
Member	Steven Care, MD	"	"	"	"
Member	Dennis McGee, MD	"	"	"	"
Member	Larry Showalter, MD	"	"	"	"
Member	Howard A. King, MD	"	"	"	"
Member	Steve Roser, MD	"	"	"	"
Member	Colin Poole, MD	"	"	"	"
Member	Louis E. Murdock, MD	"	"	"	"
Member	Michael J. Curtin, MD	"	"	"	"
Member	Alejandro Homaechvarria, MD	"	"	"	"
Member	Erik Heggland, MD	"	"	"	"
Member	Idaho Elks Rehab Hospital, Inc	"	"	"	"