

State of Idaho

Department of State

CERTIFICATE OF AUTHORITY OF HOSPITAL SHARED SERVICES ASSOCIATION

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of HOSPITAL SHARED SERVICES ASSOCIATION

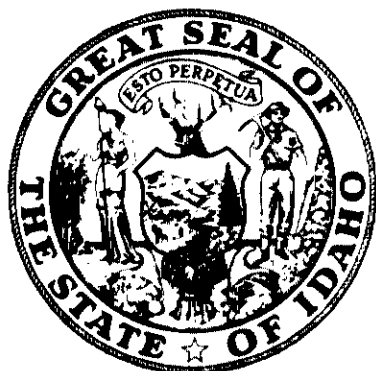
_____ for a Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to HOSPITAL SHARED SERVICES ASSOCIATION

to transact business in this State under the name HOSPITAL SHARED SERVICES ASSOCIATION

_____ and attach hereto a duplicate original of the Application for such Certificate.

Dated December 16, 1987



Pete T. Cenarrusa

SECRETARY OF STATE

Sandra M. Anderson

Corporation Clerk

APPLICATION FOR CERTIFICATE OF AUTHORITY

(Nonprofit Corporation)

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To the Secretary of State of Idaho

Pursuant to Section 30-1-110, Idaho Code, the undersigned Corporation hereby applies for a Certificate of Authority to transact business in your State, and for that purpose submits the following statement:

1. The name of the corporation is HOSPITAL SHARED SERVICES ASSOCIATION

2. The name which it shall use in Idaho is HOSPITAL SHARED SERVICES ASSOCIATION

(To be used only when required to avoid a conflict with a name already on file. Must be accompanied by a Board of Directors resolution adopting assumed name in Idaho.)

3. It is incorporated under the laws of THE STATE OF WASHINGTON

4. The date of its incorporation is MARCH 10, 1970 and the period of its duration is PERPETUAL

5. The address of its principal office in the state or country under the laws of which it is incorporated is

190 QUEEN ANNE AVENUE NORTH 3RD FLOOR SEATTLE, WA 98109

6. The address to which correspondence should be addressed, if different from that in item 5.

7. The street address of its proposed registered office in Idaho is BOX #5 WESLAKE ROAD SOUTH CRAIGMONT, IDAHO 83523, and the name of its proposed

registered agent in Idaho at that address is E. L. TATKO

8. The purpose or purposes which it proposes to pursue in the transaction of business in Idaho are:

TO PROVIDE GROUP PURCHASING SERVICE FOR HOSPITALS WITH THE END RESULT

BEING REDUCED HEALTH CARE COSTS

9. The names and respective addresses of its directors and officers are:

Name	Office	Address
<u>Phillip M. Nudelman</u>	<u>President</u>	<u>521 Wall St Seattle, WA 98121</u>
<u>David W. Gitch</u>	<u>Secretary</u>	<u>9th and Jefferson Seattle, WA 98104</u>
<u>Larry D. Woodruff</u>	<u>Treasurer</u>	<u>1035 116th Ave Bellevue, WA 98004</u>
<u>Jon K. Mitchell</u>	<u>Past President</u>	<u>South 400 Jefferson St Spokane 99204</u>
<u>Edmon W. Meyers</u>	<u>Dir at Large</u>	<u>509 East Highland Ave Chelan 98816</u>
<u>Jon R. Davis</u>	<u>Dir at Large</u>	<u>888 Swift Blvd Richland, WA 99352</u>
<u>Carl A. Munding</u>	<u>Pres Elect</u>	<u>Pacific & Nassau Box 1087, Everett 98206</u>
<u>John Bencich</u>	<u>Dir at Large</u>	<u>747 Summit Ave Seattle 98107</u>

10. The corporation accepts and shall comply with the provisions of the Constitution and the laws of the State of Idaho.

11. This Application is accompanied by a certificate of Corporate Status or Existence, duly authenticated by the proper officer of the state or country under the laws of which it is incorporated.

Dated: November 30, 1987

HOSPITAL SHARED SERVICES ASSOCIATION

(Corporation Name)
By Phillip M. Nudelman President
Its President/Vice President (please specify)
and David W. States
Its Secretary/Assistant Secretary (please specify)

STATE OF WASHINGTON)
COUNTY OF KING) ss:

I, DAVID W. STATES, a notary public, do hereby certify that on this 30th day of November, 19 87, personally appeared before me Phillip M. Nudelman, who being by me first duly sworn, declared that he is the President/Vice President of HOSPITAL SHARED SERVICES ASSN.

that he signed the foregoing document as President/Vice President of the corporation and that the statements therein contained are true.

David W. States
Notary Public

To and for the State of wa.
residing at Seattle.



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STATE of WASHINGTON SECRETARY of STATE

I, **Ralph Munro**, Secretary of State of the State of Washington and custodian of its seal, hereby certify that, according to records on file in this office, as of the date of this certificate,

HOSPITAL SHARED SERVICES ASSOCIATION

is a Washington Non Profit corporation,

duly authorized to transact business or conduct affairs as a corporation in the State of Washington.

Date: July 23, 1987

Corporation Number: 22040505

Date of Incorporation
or Qualification: March 10, 1970

Given under my hand and the seal of the State
of Washington, at Olympia, the State Capitol.

Ralph Munro, Secretary of State

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