

State of Idaho

Office of the Secretary of State

**CERTIFICATE OF AUTHORITY
OF
AVALON HEALTH SERVICES, LLC**

File Number W 134784

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Uniform Limited Liability Act, 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 Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: February 27, 2014



Ben Yursa
SECRETARY OF STATE

By

[Signature]



APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 FEB 27 PM 2:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Avalon Health Services, LLC

2. If the name of the limited liability company is not permissible or is not available in Idaho, the name the foreign limited liability company will use in Idaho is:

3. The jurisdiction under whose laws the limited liability company is formed is: DE

4. The name and complete street address of the registered agent in Idaho is:

Corporation Service Company

12550 W. Explorer Drive, Suite 100, Boise, ID 83713

5. The street and mailing address of the limited liability company's principal office is:

1511 North Westshore Blvd. Tampa, FL 33607

Street Address

Mailing Address, if different

6. The street and mailing address of the limited liability company's office in the jurisdiction under whose laws it is organized is:

2711 Centerville Road Suite 400 Wilmington, DE 19808

Street Address

Mailing Address, if different

7. The name and mailing address of at least one member or manager:

Avalon Health Manager LLC

1511 North Westshore Blvd. Tampa, FL 33607

8. The mailing address for future correspondence:

12550 W. Explorer Drive, Suite 100, Boise, ID 83713

9. Signature of a manager, member or authorized person.

Signature

Adam Boehler

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE

02/27/2014 05:00

CK: NONE CT: 1157 DH: 1412617

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVALON HEALTH SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVALON HEALTH SERVICES, LLC" WAS FORMED ON THE TWENTIETH DAY OF JUNE, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5354314 8300

140232388

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1159168

DATE: 02-25-14