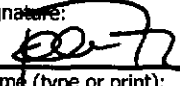


No. <b>W 79156</b>	<b>Due no later than Nov 30, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA							
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF          RECEIVED BY DUE          DATE</b>	1. <b>Mailing Address: Correct in this box if needed.</b> HEALTHCARE SALES NATIONAL MANAGEMENT SERVICES GROUP, LLC LEGAL DEPT ONE PARK PLAZA NASHVILLE TN 37203		3. <u>New</u> Registered Agent Signature.							
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.										
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 5%;">State</th> <th style="width: 5%;">Country</th> <th style="width: 15%;">Postal Code</th> </tr> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Michael Cuffe	Three Maryland Farms, Ste. 250	Brentwood	TN	US	37027				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	John M. Franck II	One Park Plaza	Nashville	TN	US	37203				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Donald W. Stinnett	One Park Plaza	Nashville	TN	US	37203				
Manager <input type="checkbox"/> Member <input type="checkbox"/>										
5. Organized Under the Laws of:  <div style="text-align: center; font-weight: bold; font-size: large;">             TENNESSEE              W 79156           </div>		6. Signature:  <hr/> Name (type or print): <b>John M. Franck II</b>		Date: <b>10/08/2012</b>  <hr/> Title: <b>Manager</b>						
Issued 09/25/2012 by PEH				108943						