

# State of Idaho

Office of the Secretary of State

**CERTIFICATE OF WITHDRAWAL  
OF  
NAVIGATOR HEALTH MANAGEMENT SOLUTIONS, INC.**

**File Number C 184554**

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that Application for Certificate of Withdrawal from this State, 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 Withdrawal and attach hereto a duplicate of the Application for such Certificate.

Dated: February 18, 2014



*Ben Yursa*

SECRETARY OF STATE

By *[Signature]*



# APPLICATION FOR CERTIFICATE OF WITHDRAWAL

(Instructions on back of application)

**FILED EFFECTIVE**  
2014 FEB 18 AM 10:07

SECRETARY OF STATE  
STATE OF IDAHO

To the Secretary of State of Idaho

Pursuant to Section 30-1-1520, **Idaho Code**, the undersigned Corporation hereby applies for a certificate of withdrawal from the State of Idaho, and for that purpose submits the following statement:

1. The name of the corporation is:

Navigator Health Management Solutions, Inc.

The name which it used in Idaho is:

Navigator Health Management Solutions, Inc.

2. It is incorporated under the laws of Tennessee
3. It is not transacting business in the State of Idaho.
4. It hereby surrenders its authority to transact business in said state.
5. It revokes the authority of its registered agent in the State of Idaho to accept service of process and consents that service of process in any action, suit or proceeding based upon any cause of action arising in the State of Idaho during the time it was authorized to transact business therein may thereafter be made on it by registered or certified mail to the corporation at the address listed in item 6., below.
6. The post office address to which process against the corporation may be mailed is:  
1000 Corporate Centre Drive, Suite 100 Franklin, TN 37067
7. It agrees to notify the Secretary of State of the State of Idaho of any change to the address in Item 6.

Signature

*Debbie Eaton*

Typed Name Debbie Eaton

Capacity Senior VP/Owner

Customer Acct # :

(if using pre-paid account)

Secretary of State use only

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Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE  
02/18/2014 05:00  
CK: 11643 CT: 248772 BH: 1418894  
1 @ 20.00 = 20.00 FOR WITHDR # 2

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