

No. W 120551		Due no later than Jan 31, 2018 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. HOSPITALISTS OF CALIFORNIA, LLC KELLY GREANEY 235 BROOKVIEW CENTRE WAY STE 400 KNOXVILLE TN 37919 USA		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
						3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	IPC HEALTHCARE, INC.	4605 LANKERSHIM BLVD STE 617	NORTH HOLLYWOOD	CA	USA	91602	
5. Organized Under the Laws of: CA W 120551		6. Annual Report must be signed.* Signature: JOHN R. STAIR Name (type or print): JOHN R. STAIR Date: 01/19/2018 Title: Assistant Secretary					
Processed 01/19/2018 * Electronically provided signatures are accepted as original signatures.							