

State of Idaho

Office of the Secretary of State

CERTIFICATE OF AUTHORITY

OF

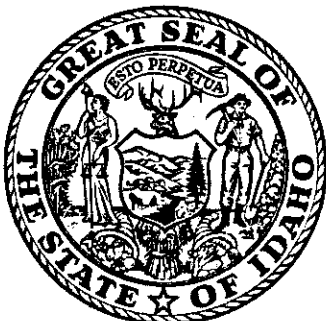
COMMUNITY HEALTH ASSOCIATION OF SPOKANE
dba COMMUNITY HEALTH ASSOCIATION OF SPOKANE INC.

File Number C 178077

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 Non-Profit Corporation 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: April 10, 2008



Ben Yursa

SECRETARY OF STATE

By

Christine

203



APPLICATION FOR CERTIFICATE OF AUTHORITY (Nonprofit)

(Instructions on back of application)

(Instructions on back of application)
The undersigned Corporation applies for a Certificate of Authority and states as follows:

FILED EFFECTIVE

SECRETARY OF STATE
103 STATES 85 IDAHO

- SECRET
STATE OF IDAHO
1. The name of the corporation is: Community Health Association of Spokane Inc.
2. The name which it shall use in Idaho is: Community Health Association Of Spokane Inc.
3. It is incorporated under the laws of: Washington State
4. Its date of incorporation is: 9-8-1994 and its duration, if other than perpetual, is: _____
5. The street address of its principal office is:
3919 N Maple St. Spokane, WA 99205
6. The address to which correspondence should be addressed, if different than Item 5, is:

7. The street address of its registered office in Idaho is:
601 E. Seltice Way Suite 202 Post Falls, ID 83854
and its registered agent in Idaho at that address is: Columbia Stock Transfer Company
8. Does the corporation have members? ☐ Yes ☒ No
9. The names and respective addresses of its directors and officers are:

Name	Title	Address
Peg Hopkins	CEO	3919 N. Maple St. Spokane, WA 99205
Nancy Ludwick	Chair	3919 N. Maple St. Spokane, WA 99205
Michael Muglia	Vice-Chair	" "
Geoff Norwood	Treasurer Secretary	" "

Dated: _____
Signature: Peg Hopkins
Typed Name: _____
Capacity: CEO

Secretary of State use only

IDAHO SECRETARY OF STATE
04/10/2008 05:00
CX: 102311 CT: 172099 BH: 1109352
1 @ 30.00 = 30.00 AU NON-P # 2
1 @ 20.00 = 20.00 NON EXPD # 3

C/78077

UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION
OF
COMMUNITY HEALTH ASSOCIATION OF SPOKANE

I FURTHER CERTIFY that the records on file in this office show that the above named Non-Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 9/8/1994.

I FURTHER CERTIFY that as of the date of this certificate, COMMUNITY HEALTH ASSOCIATION OF SPOKANE remains active and has complied with the filing requirements of this office.

Date: April 9, 2008

UBI: 601-574-451



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State