





Office of the secretary of state, Phil McGrane FOREIGN REGISTRATION STATEMENT (BUSINESS

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0005565380

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Filing Fee

Selected Service Type: Standard (filing fee \$100)

1. The name this business corporation will use in Idaho is:

Type of Corporation

Foreign Professional Business Corporation

Entity name

Evernorth Care Providers - Arizona PC

The name of the business corporation in its home jurisdiction as shown on the attached certificate of existence/good standing: Evernorth Care Providers - Arizona PC

Upload or Mail a one page PDF of a Certificate of

Existence/Good Standing from the home jurisdiction dated

within 90 days of today.

Profession

The business is organized to practice the profession of:

Medicine

2. Home Jurisdiction

The jurisdiction of formation is:

ARIZONA

3. The street address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Street Address

8888 EAST RAINTREE DRIVE

SUITE 300

SCOTTSDALE, AZ 85260

4. The mailing address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

Mailing Address

8888 EAST RAINTREE DRIVE

SUITE 300

SCOTTSDALE, AZ 85260

5. The complete street address of the principal office is:

Principal Office Address

950 BANNOCK STREET

SUITE 1100

BOISE, ID 83702

6. The mailing address of the principal office is:

Mailing Address

730 COOL SPRINGS BLVD

STE 500

FRANKLIN, TN 37067-7331

7. Registered Agent Name and Address

Registered Agent

C T CORPORATION SYSTEM

Commercial Registered Agent

Physical Address

1555 W SHORELINE DR

STE 100

BOISE, ID 83702

Mailing Address

1555 W SHORELINE DR

STE 100

BOISE, ID 83702

I affirm that the registered agent appointed has consented to serve as registered agent for this entity.



Name	Title	Address
Cheryl Hilton DO	President & Director	730 COOL SPRINGS BLVD STE 500 FRANKLIN, TN 37067-7331
Shannon Alsop DO	Secretary, Treasurer, Director	730 COOL SPRINGS BLVD STE 500 FRANKLIN, TN 37067-7331

Signature of individual authorized by the entity to sig	n:
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Cheryl Hilton DO 01/18/2024

Sign Here Date

Job Title: President







Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

EVERNORTH CARE PROVIDERS - ARIZONA PC

ACC file number: 23539477

was incorporated under the laws of the State of Arizona on 06/07/2023;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 12/21/2023

Douglas R. Clark, Executive Director

Angle R.Clark



