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| No. W 128207 | | Due no later than Aug 31, 2014 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. PORTNEUF QUALITY ALLIANCE, LLC REBECCA HURLEY 2400 DALLAS PKWY 450 PLANO TX 75093 USA | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA | |
| | | | | 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 | POCATELLO HEALTH SYSTEM, LLC | 2400 DALLAS PARKWAY SUITE 450 | PLANO | TX | USA 75093 |
| 5. Organized Under the Laws of: DE W 128207 | | 6. Annual Report must be signed.* Signature: Rebecca Hurley Name (type or print): Rebecca Hurley Date: 09/19/2014 Title: EVP ofthe Member | | | |
| Processed 09/19/2014 | | * Electronically provided signatures are accepted as original signatures. | | | |