## State of Idaho

Office of the Secretary of State

**CERTIFICATE OF WITHDRAWAL** 

OF

NORTHWEST HOSPITAL MEDICINE PHYSICIANS, INC.

File Number C 189451

I, LAWERENCE DENNEY, 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: April 27, 2015



SECRETARY OF STATE

By Slery Dedrie



To the Secretary of State of Idaho

Typed Name John R. Stair

Capacity Asst. Secretary

## APPLICATION FOR CERTIFICATE 2015 APR 27 PM 2: 05 OF WITHDRAWAL

(Instructions on back of application)

Pursuant to Section 30-1-1520, Idaho Code, the undersigned Corporation hereby applies for a

SECRETARY OF STATE STATE OF IDAHO

	The name of the corporation is:
	Northwest Hospital Medicine Physicians, Inc.
	The name which it used in Idaho is:
į	t is incorporated under the laws of
	t is not transacting business in the State of Idaho.
į	t hereby surrenders its authority to transact business in said state.
; ;	t 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 hereafter be made on it by registered or certified mail to the corporation at the address listed in item 5., below.
•	The post office address to which process against the corporation may be mailed is:
	Attn: Legal Dept., 265 Brookview Centre Way, Suite 400, Knoxviile, TN 37919
	Attn: Legal Dept., 265 Brookview Centre Way, Suite 400, Knoxviile, TN 37919  t agrees to notify the Secretary of State of the State of Idaho of any change to the address in Item 6.
	t agrees to notify the Secretary of State of the State of Idaho of any change to the address in Item 6.

C18945/

IDAHO SECRETARY OF STATE 04/28/2015 05:00

CK:PREPAID CT:1157 BH:1472912 16 20.00 = 20.00 FOR WITHDR #2