

State of Idaho

Department of State

CERTIFICATE OF AUTHORITY
OF

VENCARE HOSPICE, INC.

File number C 117517

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of VENCARE HOSPICE, INC. for a Certificate of Authority to transact business in this State, duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to VENCARE HOSPICE, INC. to transact business in this State under the name VENCARE HOSPICE, INC. and attach hereto a duplicate original of the Application for such Certificate.

Dated: December 23, 1996



Pete T. Cenarrusa
SECRETARY OF STATE

By *Chris A. Hadley*

APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

DEC 23 10 28 AM '96
 SECRETARY OF STATE
 STATE OF IDAHO

To the Secretary of State of Idaho

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is Vencare Hospice, Inc.
2. The name which it shall use in Idaho is Vencare Hospice, Inc.
3. It is incorporated under the laws of Kentucky
4. Its date of incorporation is 7/16/92 and its duration, if other than perpetual, is _____
5. The address of its principal office in the state or country under the laws of which it is incorporated is
3300 Providian Center, Louisville, KY 40202
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 300 North 6th Street, Boise, Idaho 83701, and its registered agent in Idaho at that address is C T CORPORATION SYSTEM
8. The purpose or purposes which it is proposed to pursue in the transaction of business in Idaho are:
Any and all lawful purposes for which corporations may be incorporated and hospice operations and services.
9. The names and respective addresses of its directors and officers are:

Name	Office	Address
<u>See attached</u>	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. The corporation accepts and shall comply with the Constitution and the laws of the State of Idaho.

Dated: 12/18/96

Vencare Hospice, Inc.
 (Corporation name)

By Jill L. Force
 Its President, Vice President, Secretary or Assistant Secretary
 (please specify)

Jill L. Force, Vice President and Secretary

IDAHO SECRETARY OF STATE
 Secretary of State use only
 DATE 12/23/1996 0900 49182
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 CK #: 90480 CUST#: 70014
 AUTH PRO
 1@ 100.00= 100.00
 CORP SUR 1@ 20.00= 20.00
 #: C

Directors and Officers
Vencare Hospice, Inc.

DIRECTORS:

Michael R. Barr Director
Primary : 3300 Providian Center
Address : 400 West Market Street
Louisville, KY 40202
(502) 596-7300

W. Bruce Lunsford Director
Primary : 3300 Providian Center
Address : 400 West Market Street
Louisville, KY 40202
(502) 596-7300

W. Earl Reed, III Director
Primary : 3300 Providian Center
Address : 400 West Market Street
Louisville, KY 40202
(502) 596-7300

OFFICERS:

Frank W. Anastasio Vice President, Ancillary Services
Primary : 3300 Providian Center
Address : 400 West Market Street
Louisville, KY 40202
(502) 596-7300

Michael R. Barr Chief Operating Officer and Executive
Vice President
Primary : 3300 Providian Center
Address : 400 West Market Street
Louisville, KY 40202
(502) 596-7300

Susan E. Bell Vice President, Corporate
Communications
Primary : 3300 Providian Center
Address : 400 West Market Street
Louisville, KY 40202
(502) 596-7300

Mary Ann Evans	Vice President, Clinical Operations
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	
Jill L. Force	Vice President, General Counsel and Secretary
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	
James H. Gillenwater, Jr.	Vice President, Planning and Development
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	
Thomas T. Ladit	Executive Vice President, Operations
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	
Joseph L. Landenwich	Assistant Secretary
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	
Richard A. Lechleiter	Vice President, Finance and Corporate Controller
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	
Maria M. Levering	Vice President, Administrative Services
Primary : 3300 Providian Center	
Address : 400 West Market Street	
Louisville, KY 40202	
(502) 596-7300	

W. Bruce Lunsford	Chairman of the Board, President, and Chief Executive Officer
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	
Steven L. Monaghan	Vice President, Facility Accounting
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	
Brian L. Pugh	Vice President, Program Development
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	
W. Earl Reed, III	Chief Financial Officer and Executive Vice President
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	
T. Richard Riney	Assistant Secretary
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	
Thomas M. Schuhmann	Vice President, Reimbursement
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	
David R. Windhorst	Vice President, Financial Systems
Primary : 3300 Providian Center Address : 400 West Market Street Louisville, KY 40202 (502) 596-7300	



OFFICE OF THE SECRETARY OF STATE

DOMESTIC CORPORATION
CERTIFICATE OF EXISTENCE

I, JOHN Y. BROWN III, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

VENCARE HOSPICE, INC.

is a corporation duly organized and existing under the laws of the Commonwealth of Kentucky, whose date of incorporation is JULY 16, 1992

and whose period of duration is PERPETUAL

I further certify that all fees and penalties owed to the Secretary of State have been paid to date; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS Chapter 271B.16-220 or 273.3671 has been delivered to the Secretary of State on behalf of said corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal, at Frankfort, Kentucky, this 17TH day of DECEMBER, 1996

JOHN Y. BROWN III
Secretary of State
Commonwealth of Kentucky
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