



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 OCT 23 PM 3: 57

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Idaho Behavioral Health Services, LLC

2. The complete street and mailing addresses of the initial designated office:

3100 Channing Way, Idaho Falls, ID 83404

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

C T Corporation System

(Name)

1111 West Jefferson, Suite 530, Boise, ID 83702

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name	Address
William B. Rutherford	Three Maryland Farms, Ste 250, Brentwood, TN 37027
Donald W. Stinnett	One Park Plaza, Nashville, TN 37203
John M. Franck II	One Park Plaza, Nashville, TN 37203

5. Mailing address for future correspondence (annual report notices):

One Park Plaza, Nashville, TN 37203

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

*Dora A. Blackwood*

Typed Name: Dora A. Blackwood, Authorized Person

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/23/2012 05:00  
CK: 27728 CT: 28168 BH: 1344026  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 28.00 = 28.00 EXPEDITE C # 3

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