

No. W 118090	Due no later than Oct 31, 2017 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.		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
	EASTERN IDAHO REGIONAL MEDICAL CENTER INPATIENT SERVICES, LLC SHIRLEY SCHARF ONE PARK PLAZA LEGAL DEPARTMENT NASHVILLE TN 37203		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
MANAGER	WILLIAM B. RUTHERFORD	ONE PARK PLAZA	NASHVILLE	TN	USA	37203
MANAGER	CHRISTOPHER F. WYATT	ONE PARK PLAZA	NASHVILLE	TN	USA	37203
MANAGER	JOHN M. FRANCK II	ONE PARK PLAZA	NASHVILLE	TN	USA	37203
5. Organized Under the Laws of: ID W 118090	6. Annual Report must be signed.* Signature: John M. Franck II Name (type or print): John M. Franck II		Date: 10/25/2017 Title: Manager			
Processed 10/25/2017		* Electronically provided signatures are accepted as original signatures.				