

No. W 92979		Due no later than May 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		1. Mailing Address: Correct in this box if needed. MOUNTAIN VIEW HOSPITAL, LLC 40 BURTON HILLS BOULEVARD SUITE 500 NASHVILLE TN 37215		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713		
NO FILING FEE IF RECEIVED BY DUE DATE				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	SMBI IDAHO, LLC	40 BURTON HILLS BOULEVARD SUITE 500	NASHVILLE	TN	USA	37215
5. Organized Under the Laws of: DE W 92979		6. Annual Report must be signed.* Signature: JENNIFER BALDOCK Name (type or print): JENNIFER BALDOCK Date: 05/11/2017 Title: AUTHORIZED PERSON				
Processed 05/11/2017		* Electronically provided signatures are accepted as original signatures.				