

11 MAR 11 AM 8:39



STATEMENT OF CHANGE OF REGISTERED AGENT,
REGISTERED OFFICE, OR BOTH
(See reverse for instructions)

SECRETARY OF STATE
STATE OF IDAHO

File #: 3925

The undersigned entity submits the following statement for the purpose of changing its registered agent, its registered office, or both, in the State of Idaho.

1. The name of the entity is:

ST. LUKE'S REGIONAL MEDICAL CENTER, LTD.

2. The name and street address of its old registered agent and office is:

JEFFREY S TAYLOR

190 E. BANNOCK

BOISE, ID 83712

3. The name and street address of its new registered agent and office in Idaho is:

CHRISTINE NEUHOFF

190 E. BANNOCK STEET

(not a PO box or PMB)

BOISE, ID 83712

I consent to serve as registered agent for the above-named entity.

Christine Neuhoff
(Signature of new registered agent)

March 7, 2011
(Date)

Dated: 3-8-11

Signature: *J. Taylor*

Printed: Jeffrey S Taylor

Capacity: SVP, CFO