

AMENDMENT TO CERTIFICATE OR REGISTRATION OF LIMITED DADTNEBBLID LIMITED PARTNERSHIP

| | (Instructions on back of application) |
|----|--|
| 1. | The name of the limited partnership is: |
| | Family Medical Associates West Limited Partnership |
| | If the Limited Partnership has been administratively dissolved and the name is no longer available for use, #3a below must include an amendment of name. |
| 2. | The date on which its certificate or registration of limited partnership was filed with the Idaho |
| | Secretary of State was December 23, 1985 and it's Domestic State is: Idaho |
| 3. | The certificate of limited partnership is amended as follows: (check appropriate box(es)) a. The name of the limited partnership is amended to read: |
| | b. The name and business address of the registered agent are amended to read: P. Jeffery Thompson, 1995 East 17th Street, Idaho Falls, Idaho 83404 |
| | c. The name of each withdrawing general partner is: |
| | Family Emergency Center West, P.A. |
| | d. The name and business address of each new general partner are: (if more space is needed, continue in block f) BBT, LLC; 1995 East 17th Street, Idaho Falls, Idaho 83404 |
| | e. The business of the limited partnership is continued following an event of withdrawal of a general partner. f. Other amendments (optional): |
| | Signature of at least one general partner and all new general partners. Signature Partners WEST, P.A. Signature By: P. Jeffery Thompson, Secretary BET LIC Signature Property Sign |

L1054