

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 OCT 10 PM 4:31

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Eastern Idaho Regional Medical Center Inpatient Services, LLC

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

One Park Plaza, Nashville, TN 37203

(Street Address)

P.O. Box 750, Nashville, TN 37202

(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
<u>William B. Rutherford</u>	<u>Three Maryland Farms, Ste. 250, Brentwood, TN 37027</u>
<u>Donald W. Stinnett</u>	<u>One Park Plaza, Nashville, TN 37203</u>
<u>John M. Franck II</u>	<u>One Park Plaza, Nashville, TN 37203</u>
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<u> </u>	<u> </u>

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

Shirley Scharf, One Park Plaza - Legal Dept., Nashville, TN 37203

6. Future effective date of filing (optional):
-

Signature of a manager, member or authorized person.

Signature

Typed Name:

Dora A. Blackwood, Authorized Person

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE
 10/11/2012 05:00
 CK: 27652 CT: 20160 BH: 1343170
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