

1.) CORPORATION NAME: Arizant Healthcare Inc.	DUE DATE: 4/30/2014				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA	SCC ID NO: F1545245				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: MN					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10393 WEST 70TH STREET

CITY/ST/ZIP: EDEN PRAIRIE, MN 55344

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DEBRA A RECTENWALD TITLE: PRESIDENT ADDRESS: 10393 W 70TH ST CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344-3446	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
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NAME: MARIE B HUMBERT TITLE: CFO,ASST SECR ADDRESS: 10393 W 70TH ST CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55344	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: KIMBERLY TORSETH TITLE: AST TREAS ADDRESS: 3M CENTER CITY/ST/ZIP/CO: ST PAUL, MN 55144	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: Scott Krohn TITLE: TREASURER ADDRESS: 3M Center CITY/ST/ZIP/CO: St. Paul, MN 55144	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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NAME: Maureen A Harms TITLE: SECRETARY ADDRESS: 3M Center CITY/ST/ZIP/CO: St. Paul, MN 55144	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ KIMBERLY TORSETH	KIMBERLY TORSETH, AST TREAS	6/17/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.