

Lewis-Gale Physicians, LLC · Salem Office 1802 Braeburn Drive Salem, VA 24153

Tel: 540.444.WELL Toll free: 866.244.WELL

www.lgphysicians.com

April 18, 2006

Mr. Dennis R. Lawyer Health Physicist Nuclear Regulatory Commission - Region 1 475 Allendale Rd. King of Prussia, Pa. 19406-1415

Docket No. 03029528 Control No. 138569 MS16 T-6 REGION 1

License No. 45-24869-01

Dear Mr. Lawyer:

This is in reference to your letter of April 5, 2006 requesting additional information.

- 1. Attached is the information concerning changes of control by the applicant.
 - a. Complete description of the transaction is attached.
 - b. Contract person is Kay Butterworth, Manager of Operations, 540-772-3641
 - c. No changes in personnel or duties.
 - d. No changes in the organization except for ownership and name. It is the same location, building, equipment, etc.
 - e. No change in the status of the surveillance program.
 - f. All records concerning the safe and effective decommissioning of the facility remain on-site –No Change.
 - g. I confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor

Sincerely,

M. Kay Butterworth

Manager of Operations

Cc: Mr. Buddy Blackwood, Prac. Administrator

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State Corporation Commission

I Certify the Following from the Records of the Commission:

The foregoing is a true copy of all business entity documents on file in the Clerk's Office of the Commission relating to Lewis-Gale Physicians, LLC, a Virginia limited liability company.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: August 30, 2005

Joel H. Peck, Clerk of the Commissi

COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

AT RICHMOND, AUGUST 30, 2005

The State Corporation Commission has found the accompanying articles submitted on behalf of

Lewis-Gale Physicians, LLC

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF ORGANIZATION

be issued and admitted to record with the articles of organization in the Office of the Clerk of the Commission, effective August 30, 2005.

STATE CORPORATION COMMISSION

RECOLLEGICATION OF THE REPORT OF THE PROPERTY OF

Commissioner

· 大大型的 "我们就是我们的现在分词,我们就是我们的事情,我们就是我们的。"

CLINTON MILLER CHAIRMAN

MARK C. CHRISTIE COMMISSIONER

THEODORE V. MORRISON, JR. COMMISSIONER



JOEL H. PECK CLERK OF THE COMMISSION P.O. BOX 1197 RICHMOND, VIRGINIA 23218-1197

STATE CORPORATION COMMISSION Office of the Clerk

August 30, 2005

CT CORPORATION SYSTEM TINIKA C BAYLOR 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802

RE:

Lewis-Gale Physicians, LLC

ID:

S163876 - 8

DCN:

05-08-29-0625

Dear Customer:

This is your receipt for \$100.00, to cover the fees for filing articles of organization for a limited liability company with this office.

This is also your receipt for \$100.00 to cover the fee(s) for expedited service(s).

The effective date of the filing is August 30, 2005.

If you have any questions, please call (804) 371-9733 or toll-free in Virginia, 1-866-722-2551.

Sincerely,

Joel H. Peck

Clerk of the Commission

DLLCRCPT LLNCD CIS0354



STATE CORPORATION COMMISSION

Richmond, August 30, 2005

This is to certify that the certificate of organization of

Lewis-Gale Physicians, LLC

was this day issued and admitted to record in this office and that the said limited liability company is authorized to transact its business subject to all Virginia laws applicable to the company and its business. Effective date: August 30, 2005



State Corporation Commission Attest:



COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

ARTICLES OF ORGANIZATION OF A DOMESTIC LIMITED LIABILITY COMPANY

Pursuant to Chapter 12 of Title 13.1 of the Code of Virginia the undersigned states as follows:

The name of the limited liability company is				
Lewis-Gale Physicians, LLC				
(The name must contain the words "limited company" or "limited liability company" or the abbreviation "LC.", "LC", "LLC." or "LLC"				
2. A. The name of the limited liability company's initia	al registered agent	is		
C T Corporation System				
B. The registered agent is (mark appropriate box):				
 (1) an INDIVIDUAL who is a resident of Virginia and □ a member or manager of the limited liability company. □ a member or manager of a limited liability company that is a member or manager of the limited liability company. □ an officer or director of a corporation that is a member or manager of the limited liability company. □ a general partner of a general or limited partnership that is a member or manager of the limited liability company. □ a trustee of a trust that is a member or manager of the limited liability company. □ a member of the Virginia State Bar. OR (2) ☑ a domestic or foreign stock or nonstock corporation, limited liability company or registered limited liability partnership authorized to transact business in Virginia. 3. The limited liability company's initial registered office address, including the street and number, 				
If any, which is identical to the business office of the	_	•		
4701 Cox Road, Suite 301	Glen Allen (city or town)	,VA	23060 - 6802 (250)	
which is physically located in the ⊠ county or □ c	ity of	Henrico		
4. The limited liability company's principal office addre	ss, including the st	treet and nu	mber, if any, is	
One Park Plaza	Nashville	IN	37203	
(numbedstrect)	(city or town)	(state)) (zip)	
5. Organizer: Jan a. Blendan (signature)	08	/26/2005	date)	
Dora A. Blackwood	61	615/344-2162		
(printed name)		(telaphone number (optional))		

SEE INSTRUCTIONS ON THE REVERSE

SENDED AND SET OF THE PROPERTY OF A SERVICE DESCRIPTION OF THE CONTRACT OF SERVICE AND A SERVICE OF SERVICES OF

IRS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE P.O. BOX 9003 HOLTSVILLE NY 11742-9803

006153.200058.0025.001 1 MB 0.309 702

Date of this notice: 09-12-

Employer Identification Numb: 06-1755234

Form: SS-4

Number of this notice: CP 5

For assistance you may call 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

LEWIS-GALE PHYSICIANS LLC % LEWIS-GALE HOSPITAL INC SOLE MBR PD BOX 570 NASHVILLE TN 37202

006153

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 06-1755234. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possib you should use your EIN and complete name and address shown above on all federal ta forms, payments and related correspondence. If this information isn't correct, ple correct it using the tear off stub from this notice. Return it to us so we can cor your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing could result in our assigning you more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records.
- * Use this EIN and your name exactly as they appear on all your federal tax forms.
- * Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.

(IRS USE ONLY) 575E 09-12-2005 LEWI 0 0133121269 SS-4



006153

Keep this part for your records.

CP 575 E (Rev. 1-20

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575

0133121269

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 09-12-2005 EMPLOYER IDENTIFICATION NUMBER: 06-17552 FORM: SS-4 NOBOD

LEWIS-GALE PHYSICIANS LLC 2 LEWIS-GALE HOSPITAL INC SOLE F PO BOX 570 NASHVILLE TN 37202

ORGANIZATIONAL OWNERSHIP STRUCTURE CHART FOR LEWIS-GALE PHYSICIANS, LLC

LEWIS-GALE HOSPITAL, INCORPORATED (EIN # 54-0218835) One Park Plaza Nashville, TN 37203

(Sole Member and Owns 100% of the membership Intere: of Lewis-Gale Physicians, LLC)

LEWIS-GALE PHYSICIANS, LLC (EIN # 06-1755234)