## FILED EFFECTIVE

08 APR 17 AM 8: 48

File Number: **W** 68324

SECRETARY OF STATE STATE OF IDAHO

## STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS

(see reverse for instructions)

The entity identified below submits to the Secretary of Stapurpose of changing its business mailing address.	ate the following	statement for the
1. The name of the business entity is:	Life 3	HEAlth UC
2. The business mailing address is currently on file as:	so a	לסדרף
3. The business mailing address is to be changed to:  3965 NE Conners AUE	Bens,	OR 97701
4. Change of address is effective:		
☐ Upon Receipt OR ☐ 100 (Date)	9 m, 200	<b>28</b>
Signed:		
Printed Name: Joni Garacel		
Capacity:		
		•

g:\corp\forms\miscforms\change\_address.pmd

FILE ONE COPY

NO FEE REQUIRED