

Oct 17 6 32 AM '34

Pursuant to the provisions of the Idaho Business Corporation Act, the undersigned corporation organized under the laws of the State of Idaho submits the following statement for the purpose of changing its registered office or its registered agent, or both, in the State of Idaho.

1. The name of the corporation is DOCTORS' CLINIC P.A.
2. The street or RFD address of its present registered office is 590 Gifford Street, American Falls, Idaho 83211
3. The street or RFD address to which its registered office is to be changed is _____
4. The name of its old registered agent is Paul Jentes, M.D.
5. The name of its new registered agent is Dean Williams
6. The address of the registered office and the business address of the registered agent are identical.
7. The foregoing change was authorized by resolution of the board of directors.

Dated _____, 19____

By ✓ Dean L. Williams, MD
Title: ✓ President
(Must be signed by an officer of the corporation)

STATE OF _____)
) SS:
COUNTY OF _____)

I, _____, a notary public, do hereby certify that on this _____ day of _____, 19____, personally appeared before me _____, who being by me first duly sworn, declared that he is the _____ of _____

that he signed the foregoing document as _____ of the corporation and
that the statements therein contained are true.

Notary Public