



0004099564

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***REINSTATEMENT ANNUAL REPORT**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$30.00

*For Office Use Only***-FILED-**

File #: 0004099564

Date Filed: 12/14/2020 10:31:54 AM

Reinstatement Annual Report Form

Select one: Standard, Expedited or Same Day Service (see descriptions below)

Standard (filing fee \$30)

Current Entity Name

3 RIVERS HEALTH CENTER LLC

The file number of this entity on the records of the Idaho Secretary of State is:

0000325747

Organized under the laws of:

IDAHO

Entity Type:

Limited Liability Company (D)

Entity Subtype:

Limited Liability Company Subtype

Limited Liability Company

Limited Liability Company Name:

Limited Liability Company name

3 RIVERS HEALTH CENTER LLC

The registered agent on record is:

Registered Agent

KARIE A JONAK

Registered Agent

Physical Address

1421 1ST ST

IDAHO FALLS, ID 83401

Mailing Address

Agent or Address Change?

☒ Appoint new agent (address change not available).

The name and street address of the new registered agent and office in Idaho is:

Registered Agent

Registered Agent

Karie A Jonak

Physical Address:

DR KARIE JONAK

2785 EAGLE DR.

APT D304

AMMON, ID 83406

Mailing Address:

DR KARIE JONAK

2785 EAGLE DR

APT D304

AMMON, ID 83406-5726

☒ I affirm that the registered agent appointed has consented to serve as registered agent for this entity.

The mailing address of the corporation is:

2410 E 25TH ST

IDAHO FALLS, ID 83404-7549

Limited Liability Company Managers and Members

Name	Title	Address
Karie A Jonak	Manager	2785 EAGLE DR. APT D304 AMMON, ID 83406

The Application for Reinstatement must be signed by at least one governor.

B0561-5964 12/14/2020 10:31 AM Received by ID Secretary of State Lawrence Denney



Karie A Jonak

12/14/2020

Sign Here

Date

Job Title:

Manager