No. C 111129

Return to:

SECRETARY OF STATE
450 N 4th STREET
PO BOX 83720
BOISE, ID 83720-0080

REINSTATEMENT
FEE DUE: $30.00

Reinstatement Annual Report Form
ADMIN DISSOLVED 09/08/2009

1. Mailing Address: Correct in this box if needed.

LILJENQUIST CHIROPRACTIC, P.A.
CODY LILJENQUIST
1700 OVERLAND AVE
BURLEY ID 83318

2. Registered Agent and Office **(NOT A P.O. BOX)**
CODY LILJENQUIST
1700 OVERLAND AVE
BURLEY ID 83318

3. New Registered Agent Signature.

4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors and(optional) Treasurer.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
President	Cody Liljenquist	530 E 200 S.	Burley	ID.	US	83318
Vice President	Cody Liljenquist	530 E 200 S	Burley	ID.	US	83318
Secretary	Cody Liljenquist	530 E 200 S	Burley	ID	US	83318
Treasurer	Cody Liljenquist	530 E 200 S	Burley	ID	US	83318

5. Organized Under the Laws of:

IDAHO
C 111129

6.

Signature: Cody Liljenquist Inc. Date: 9-30-09

Name (type or print): Cody Liljenquist Title: Owner President

Issued 09/18/2009 by NLB