

# State of Idaho

Office of the Secretary of State

## AMENDED CERTIFICATE OF REGISTRATION

OF

**ABRAHAM LOW SELF HELP SYSTEMS**

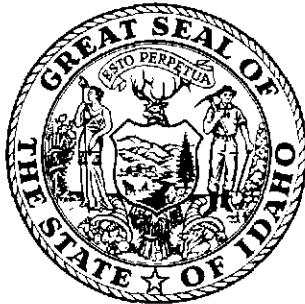
**dba ABRAHAM LOW SELF HELP SYSTEMS, INC.**

File Number C 39081

I, LAWERENCE DENNEY, Secretary of the State, hereby certify that an Application for Amended Foreign Registration has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Amended Certificate of Foreign Registration to reflect the name change from **ABRAHAM LOW SELF HELP SYSTEMS** to **RECOVERY INTERNATIONAL** **dba** **RECOVERY INTERNATIONAL, INC.** and attach hereto a duplicate of the application for such amended certificate.

Dated: June 8, 2018



  
Lawrence Denney  
SECRETARY OF STATE

By 



# AMENDMENT OF FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$30 typed, \$50 not typed

Complete and submit the application in duplicate.

2018 JUN -8 PM 2:14

SECRETARY OF STATE  
STATE OF IDAHO

1. Entity name: ABRAHAM LOW SELF HELP SYSTEMS

2. The entity name is amended to: RECOVERY INTERNATIONAL

a. If the new name is not available or permissible in Idaho, the name to be used in Idaho is:

RECOVERY INTERNATIONAL, INC.

3. The entity type is amended to:

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input checked="" type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
<input type="checkbox"/> Other: _____	

(Provide unlisted foreign entity type here)

4. The entity's jurisdiction is amended to: \_\_\_\_\_

5. The street and mailing address(es) of its principal office is amended to:

(Street Address)

(Mailing Address, if different)

6. The name, capacity, and mailing address of the governor(s) is amended to:

(Name) \_\_\_\_\_ (Capacity) \_\_\_\_\_ (Address) \_\_\_\_\_

(Name) \_\_\_\_\_ (Capacity) \_\_\_\_\_ (Address) \_\_\_\_\_

Typed Name: Sandra K. Wilcoxan

Signature: Sandra K. Wilcoxan

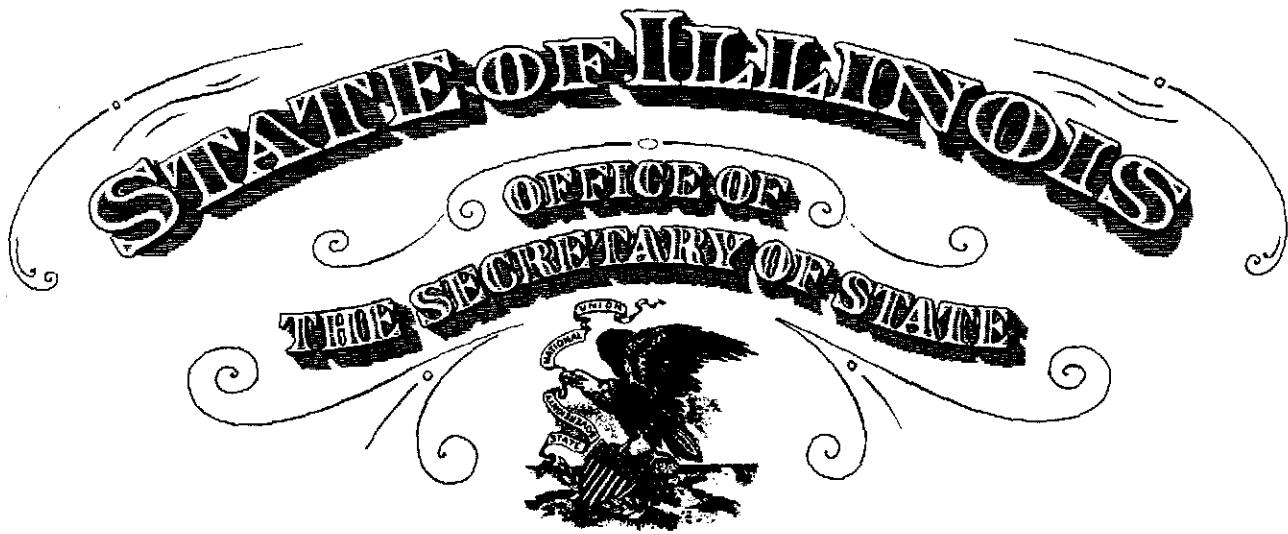
Capacity: CEO

Secretary of State use only

IDAHO SECRETARY OF STATE  
06/08/2018 05:00

CR: PREPAID CT:278665 BH:1647945  
10 30.00 = 30.00 AMD FOR RE #2

C39081



***To all to whom these Presents Shall Come, Greeting:***

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

RECOVERY INTERNATIONAL, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 03, 1940, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

***In Testimony Whereof, I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this 7TH  
day of JUNE A.D. 2018.***



Authentication #: 1815801132 verifiable until 06/07/2019

Authenticate at: <http://www.cyberdriveillinois.com>

*Jesse White*

SECRETARY OF STATE