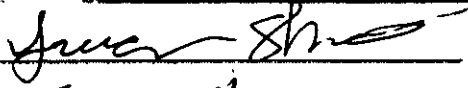


REINSTATEMENT

No. C 130244	Annual Report Form ADMIN DISSOLVED 11/08/2002		2. Registered Agent and Office NOT A P.O. BOX																															
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address: (Correct in this box, if applicable) NEURODIAGNOSTIC SERVICES & ASSOCIAT 233 BROOKSIDE DR IDAHO FALLS, ID 83404		TRINA SHARPE 233 BROOKSIDE DR IDAHO FALLS, ID 83404 3. New registered agent signature																															
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Pat Wilson</td> <td>1019 Sage wood place</td> <td>Pocatello</td> <td>ID</td> <td>83202</td> </tr> <tr> <td>V- president</td> <td>Trina Sharpe</td> <td>233 Brookside</td> <td>Idaho Falls</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Secretary</td> <td>Trina Sharpe</td> <td>233 Brookside</td> <td>Idaho Falls, ID</td> <td>ID</td> <td>83404</td> </tr> <tr> <td>Treasurer</td> <td>John Wilson</td> <td>1019 Sagerwood place</td> <td>Pocatello</td> <td>ID</td> <td>83200</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	President	Pat Wilson	1019 Sage wood place	Pocatello	ID	83202	V- president	Trina Sharpe	233 Brookside	Idaho Falls	ID	83404	Secretary	Trina Sharpe	233 Brookside	Idaho Falls, ID	ID	83404	Treasurer	John Wilson	1019 Sagerwood place	Pocatello	ID	83200
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5. Organized under the laws of: IDAHO C 130244		6. Signature  Date <u>11/15/02</u> Name (Typed or Printed) <u>Trina Sharpe</u> Title <u>Vice president</u>																																

Issued 11/15/2002