


No. <b>C126938</b>	<b>Annual Report Form</b> Due No Later Than November 30, <b>1999</b>		2. Registered Agent and Office <b>NOT A P.O. BOX</b>		
Return to: <b>SECRETARY OF STATE</b> 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FEE REQUIRED</b>	1. Mailing Address - Please Correct, If Not Correct  <b>GRIFFIN CHIROPRACTIC, P.A.</b> <b>DR JUSTIN D GRIFFIN</b> <b>10434 FAIRVIEW</b>		<b>DR JUSTIN D GRIFFIN</b> <b>10434 FAIRVIEW</b>  <b>BOISE ID 83704</b>		
	<b>* FIRST NOTICE *</b> <b>BOISE ID 83704</b>		3. Organized Under the Laws of:  <b>ID C126938</b>		
	4. Corporations: Enter Names and Business Addresses of <b>President, Secretary and Directors</b> Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> <b>Managers</b> or <input type="checkbox"/> <b>Members</b> (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
PRESIDENT	JUSTIN GRIFFIN	10434 FAIRVIEW	BOISE	ID	83704
SEC	JANA GRIFFIN	"	"	"	"
5. Signature of New Registered Agent		6. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>           Signature             Name (Typed or Printed) <b>JUSTIN GRIFFIN</b> </div> <div>           Date <b>7/14/99</b>            Title <b>PRESIDENT</b> </div> </div>			

ISSUED: 07-03-1999

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