

State of Idaho

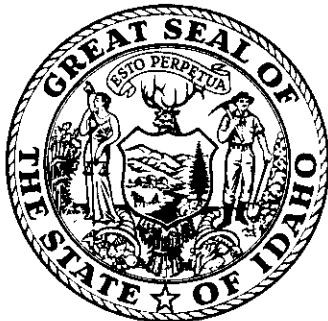
Office of the Secretary of State

LIMITED LIABILITY COMPANY REINSTATEMENT CERTIFICATE

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that the articles of organization of **TOTAL HEALTH CHIROPRACTIC, PLLC**, file number W 15157, a limited liability company organized under the laws of the State of Idaho, was administratively dissolved on July 5, 2002, for failure to file the required annual report form by the date due.

I FURTHER CERTIFY That the limited liability company has on September 10, 2003, been reinstated on the records of this office, and that its articles of organization in the State of Idaho are hereby restored.

Dated: September 10, 2003



Ben Yursa

SECRETARY OF STATE


By *Lynette Holloway*

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- Block 1: Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.
- Block 3: Only a new registered agent must sign in Block 2.
- Block 4: Enter names and business addresses of president, secretary, and directors (for corporations only) or managers/members (for LLC's only). Note: Putting "same as last year" or "same as above" will not be accepted.
- Block 5: May not be altered through the use of this form.
- Block 6: The annual report must be signed by a person authorized to represent the corporation/LLC. Print or type the name and title of the signer below the signature.

SEP 10 AM 8:54
STATE OF IDAHO

217

	APPLICATION FOR REINSTATEMENT
	To the SECRETARY OF STATE, STATE OF IDAHO
1. The name of the Idaho corporation / limited liability company applying for reinstatement following administrative dissolution or forfeiture is: <u>TOTAL HEALTH CHIROPRACTIC, PLLC</u>	
2. The date of its incorporation / organization was: <u>April 28, 2001</u>	
3. The corporation / limited liability company hereby applies for reinstatement.	
4. This application is accompanied by a current annual report, appointment of registered agent, or articles of amendment extending existence, as appropriate, and a filing fee of \$30.00.	
Signature: <u>Travis Wilson DC</u>	Secretary of State use only
Capacity/Title: <u>OWNER TRAVIS WILSON</u>	
Date: _____	
<small>(Must be signed by a chairman of the board of directors or officer of the corporation/LLC)</small>	

IDAHO SECRETARY OF STATE
09/10/2003 05:00
CK: 1300 CT: 172654 BH: 700910
1 @ 30.00 = 30.00 CORP REINS # 2