

REINSTATEMENT

FILED/EFFECTIVE

No. W 8745	Annual Report Form ADMIN DISSOLVED 08/07/2002		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 RIGBY FAMILY MEDICAL CENTER, P.L.L. BRYAN D HAMMAR 182 S CLARK ST RIGBY, ID 83442		BRYAN D HAMMAR 182 S CLARK ST RIGBY, ID 83442 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 <input checked="" type="checkbox"/> Managers or <input type="checkbox"/> Members (check one) <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>owner</td> <td>Bryan D. Hammar</td> <td>182 S. Clark St.</td> <td>Rigby</td> <td>Id</td> <td>83442</td> </tr> </tbody> </table>					<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	owner	Bryan D. Hammar	182 S. Clark St.	Rigby	Id	83442
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
owner	Bryan D. Hammar	182 S. Clark St.	Rigby	Id	83442											
5. Organized under the laws of: IDAHO W 8745		6. Signature <u>[Signature]</u> Date <u>8/15/02</u> Name (Typed or Printed) <u>Bryan D. Hammar</u> Title <u>owner</u>														

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