# State of Idaho

Office of the Secretary of State

### **CERTIFICATE OF AUTHORITY**

OF

PAULA J. MURPHY CHIROPRACTIC INC.

### File Number C 192940

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, 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 Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: November 29, 2011



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By Alny Allrier



## **APPLICATION FOR CERTIFICATE** OF AUTHORITY (For Profit) (Instructions on Back of Application)

2011 NOV 29 PM 1: 39

Th	The undersigned Corporation applies for a Certificate of Authority and s	states as follows: SEURLTARY OF STATE STATE OF IDAHO
1.	The name of the corporation is:  Paula J,Murphy Chiropractic Inc.	JANE OF TORRES
2.	The name which it shall use in Idaho is: Paula J, Murphy Chiropractic Inc.	
3.	. It is incorporated under the laws of: California	
4.	4. Its date of incorporation is: 6/7/2004	
5.	5. The address of its principal office is: 750A Central Street Willits, CA 95490	
6.	The address to which correspondence should be addressed, if different from item 5, is: 500 West Idaho Street, Suite 250 Boise, ID 83702	
7.	7. The street address of its registered office in Idaho is:, 500 Wes and its registered agent in Idaho at that address is: Paula J Mu	t Idaho St, Suite 250 Boise, ID 83702 urphy, D.C.
8.	8. The names and respective business addresses of its directors and	officers are:
	Name Title	Business Address
	Paula J. Murphy, D.C.  President	500 W Idaho St, Ste 250 Boise, ID 83702
Dated: 11/29/11		Customer Acct # : (If using pre-paid account)
Siç	Signature: Toppo	Secretary of State use only
Ту	Typed Name: Paula U. Murphy, D.C.	IDAHO SECRETARY OF STATE  11/29/2011 05:00  CK: 7464710063 CT: 264511 BH: 1299628 1 0 100.00 = 100.00 AUTH PRO \$ 2
Capacity: President  [The signer must be a director or an officer of the corporation.]		IDAHO SECRETARY OF STATE  11/29/2011 05:00  CK: 7464718883 CT: 264511 BH: 1299628  1 8 188.88 = 188.88 AUTH PRO \$ 2

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### State of California Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

PAULA J. MURPHY CHIROPRACTIC INC.

FILE NUMBER: FORMATION DATE: C2659092 06/07/2004

MADA •

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

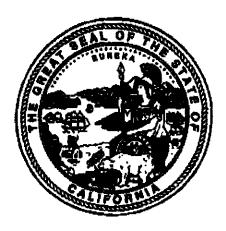
STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 28, 2011.

DEBRA BOWEN
Secretary of State