## State of Idaho

Office of the Secretary of State

## **CORPORATION REINSTATEMENT CERTIFICATE**

I, BEN YSURSA, Secretary of State of the State of Idaho, do hereby certify that **INTERMOUNTAIN HAND CLINIC**, **P.A.**, file number C 108798, a corporation organized under the laws of the State of Idaho, was administratively dissolved on March 10, 2014, for failure to file the required annual report form by the date due.

I FURTHER CERTIFY That the corporation has on June 9, 2014, been reinstated on the records of this office, and that its corporate powers or its right to do business in the State of Idaho are hereby restored.

Dated: June 9, 2014



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## APPLICATION FOR REINSTATEMENT

To the SECRETARY OF STATE, STATE OF IDAHO

2014 JUN - 9 P

SECRETARY OF STATE STATE OF IDAHO

1. The name of the Idaho corporation applying for reinstatement following administrative dissolution or forfeiture, if available, is: <a href="INTERMOUNTAIN HAND CLINIC">INTERMOUNTAIN HAND CLINIC</a>, P.A.</a>

2. The date of its incorporation was: December 30, 1994

The corporation hereby applies for reinstatement. If the entity name is unavailable, a certificate of amendment for a name change must be attached.

Signature ou Si

Lois Lenzi, President

Date:

June (2, 2014)

(must be signed by a chairman of the board of directors or officer of the corporation)

Secretary of State use only

10AHO SECRETARY OF STATE 06/09/2014 05:00

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