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File Number: <u>C177026</u>

## SECRETARY OF STATE STATEMENT OF CHANGE OF BUSINESS MAILING ADDRESS (see reverse for instructions)

The entity identified below submits to the Secretary of State the following statement for the purpose of changing its business mailing address. 1. The name of the business entity is: Northern Lakes Chiropractic Clinic, P.C. 2. The business mailing address is currently on file as: 1207 Michigan ST. STE B, Sandpoint, ID 83864 3. The business mailing address is to be changed to: 1224 Washington Ave. #203, Sandpoint, ID 83864 4. Change of address is effective: Upon Receipt OR Signed: Printed Name: Ryan A Leisy CEO Capacity: \_\_\_\_ 11/05/2011 Dated:

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FILE ONE COPY

NO FEE REQUIRED