

Due No Later Than November 30,

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

NO FEE REQUIRED

1. Mailing Address - Please Correct, If Not Correct

PHYSICIAN CENTER, A PROFESSI

~~388 MARTIN ST~~

TWIN FALLS

ID 83301

D KURT SEPPI, M.C.
388 MARTIN ST

TWIN FALLS ID 83301

3. Organized Under the Laws of:

ID W 509

** FINAL NOTICE **

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors
Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)

Office heldNameStreet or P.O. AddressCityStateZip

D. Kurt Seppi, M.D. 630 Addison Ave W Twin Falls, ID 83301
Ste 100

5. Signature of New Registered Agent

6.

Signature



Date

11-9-98

Name (Typed or Printed)

Title

ISSUED: 10-03-1998

DO NOT TAPE OR STAPLE

267