

FILED



NOTICE OF WITHDRAWAL OF REGISTRATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

To the Secretary of State of Idaho

Pursuant to the provisions of Chapter 3 Title 53, **Idaho Code**, the undersigned limited liability partnership hereby gives notice that it has been dissolved and for that purpose submits the following statement:

1. The name of the limited liability partnership is JONES CLINIC, LLP

The name which it used in Idaho is JONES CLINIC, LLP

2. It is organized under the laws of IDAHO

3. The reason for dissolution is Partnership is no longer doing business.

4. It revokes the authority of its registered agent in the State of Idaho to accept service of process and consents that service of process in any action, suit or proceeding based upon any cause of action arising in the State of Idaho during the time it was authorized to transact business therein may thereafter be made on it by registered or certified mail to the limited liability partnership at the address listed in item 5., below.

5. The post office address to which process against the limited liability partnership may be mailed is A. C. Jones III, M.D.

900 North Liberty, Suite 400

Boise, ID 83704

By

A. C. Jones III, Authorized Person
IDAHO SECRETARY OF STATE

03/24/1999 09:00
CK: 76136 CT: 20166 DN: 200136

1 @ 4.00 = 4.00 DISS LLP # 2

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