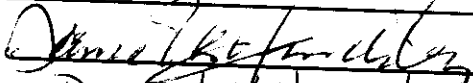


REINSTATEMENT

AUG 16 2001

No. C 92412	Annual Report Form ADMIN DISSOLVED 08/06/2001		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 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable DANIEL K. HINCKLEY, M.D., P.A. DR. DANIEL K. HINCKLEY 2065 E 17TH ST IDAHO FALLS, ID 83401		DR. DANIEL K. HINCKLEY 2065 E 17TH ST IDAHO FALLS, ID 83401	
3. <u>New</u> registered agent signature				
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)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
				<u>Zip</u>
Pres	Daniel K Hinckley	2065 E 17th St	Idaho Falls	ID 83404
Sec	Jennifer Hinckley	2065 E 17th St	Idaho Falls	ID 83404
5. Organized under the laws of: IDAHO C 92412		6. Signature  Date <u>8/16/01</u> Name (Typed or Printed) <u>Daniel K. Hinckley</u> Title <u>President</u>		

Issued 08/14/2001