

FILED EFFECTIVE

08 JAN 17 AM 8:42



STATEMENT OF CHANGE OF REGISTERED OFFICE
SECRETARY OF STATE
STATE OF IDAHO
(See reverse for instructions)

File #: W 17473

The undersigned entity submits the following statement for the purpose of changing its registered office or its registered agent, or both, in the State of Idaho.

1. The name of the entity is:
Medical Recovery Services, LLC.
2. The street address of its present registered office is:
115 E. Main Street, Rexburg, ID 83440
3. The new street address in Idaho (not a P.O. box or PMB) to which its registered office is to be changed is:
410 Memorial Drive, Ste. 201, Idaho Falls, Idaho 83402
4. The name of its old registered agent is: Dale P. Thomson
5. The name of its new registered agent is: Mark R. Fuller
6. The address of the registered office and the business address of the registered agent are identical.

Dated: January 10, 2008

Signed: Kimball Jeppesen

Printed: Kimball Jeppesen

Capacity: Manager

I consent to serve as registered agent for the above-named entity.

Mark R. Fuller
(Signature of new registered agent)

FILE ONE COPY

NO FEE REQUIRED

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Rev. 01/2007