State of Idaho

Office of the Secretary of State

CERTIFICATE OF AUTHORITY

OF

ART AND SCIENCE CHIROPRACTIC CENTER, LLC

File Number W 95965

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Uniform Limited Liability Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: August 30, 2010



Ben yoursa SECRETARY OF STATE

By Daly Pelvier



APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY

10 AUG 30 AM 8: 26

SECTOR OF STATE

	(Instructions on back	c of application)	SECT OF IDA	
1.	The name of the limited liability com	pany is:	* Oluir	
	Art and Science Chiropractic Center, LLC			
2.	If the name of the limited liability company is not permissible or is not available in Idaho, the name the foreign limited liability company will use in Idaho is:			
3.	The jurisdiction under whose laws the	ne limited liability company is formed is:	WA	
4.	The name and complete street address of the registered agent in Idaho is:			
	All Day \$49 Idaho Registered Agent LLC 1011 N. 11th Coeur D Alene, ID 83814			
5.	The street and mailing address of the 888 C Street Plummer ID 83851 Street Address PO Box 223 Plummer ID 83851 Mailing Address, if different	ne limited liability company's principal off	îce in Idaho is:	
6.	The street and mailing addresses of the limited liability company's office in the jurisdiction under whose laws it is organized is: 20 W Central Ave Spokane WA 99205 Street Address			
	Mailing Address, if different			
7.	The name and mailing address of at least one member or manager:			
	Lynna M Lies DC	1321 S Rotchford Dr Veradale WA 9903	37	
8.	Signature of an authorized person:	Secretary of State	e use only	

Authorized Signature

Lynna M Lies DC

Typed Name

s\Lt.C torms\ce Revised 07/2

W95965



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

ART AND SCIENCE CHIROPRACTIC CENTER, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 10/7/2008.

I FURTHER CERTIFY that as of the date of this certificate, ART AND SCIENCE CHIROPRACTIC CENTER, LLC remains active and has complied with the filing requirements of this office.

Date: August 24, 2010

UBI: 602-869-401

STATE OF WASHINGTON 1889 NOT

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State