



STATEMENT OF CHANGE OF  
REGISTERED AGENT,  
REGISTERED OFFICE,  
OR BOTH

(See reverse for instructions)

File #:

CL68708

FILED EFFECTIVE  
2015 SEP 15 PM 12:31  
SECRETARY OF STATE  
STATE OF IDAHO

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

1. The name of the entity is:

Valley Family Health Care, Inc

2. The name and street address of its old registered agent and office is:

Bill Moore

1441 NE 10<sup>th</sup> Ave

Payette, ID 83661

3. The name and street address of its new registered agent and office in Idaho is:

Carolyn Wesner

1441 NE 10<sup>th</sup> Ave

(not a PO box or PMB)

Payette ID 83661

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

Carolyn Wesner

(Signature of new registered agent)

Sept 15, 2015

(Date)

Dated:

9/15/15

Signature:

Donald Nelson

Printed:

Donald Nelson

Capacity:

CFO