



Idaho Corporation Reinstatement Form

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For Office Use Only

F-FILED-ted form to:

of State

B0805-3003

File #: 0005295537 statements Date Filed: 6/26/2023 10:21:00 AM

Reinstatement fee: \$30.00.		Boise, ID 83720
		Phone: (208) 334-2300
SOS Control Number: 357595	Filing Status: Inactive-Dissolv	ved (Administrative)
Professional Service Corporation (D)	Date Formed: 09/03/1996	Formation Locale: ID
Name and Mailing Address: MOBLEY PHYSICAL THERAPY, P.C. 151 E MAIN ST RIGBY, ID 83442-1417	(1)	Add or Change Mailing Address:
No change		:
Registered Agent (RA) and Registere TRACY MOBLEY, M.S., P.T. 151 E. MAIN RIGBY, ID 83442	stered Office address must be a physical lo	Change RA and/or RO Address: daho address (no postal box).
(3) New Registered Agent (RA) Signa	ture:) above, the new agent must sign here to accept the appointment.
(4) Corporations: Enter names and business add		
Title Name	Business Address	City, State, Zip
Pres. Tracy Mobile	N 151 E Main	Rigory, ID 8344
(5) Board of Directors names and business addre	ess (with zip code). Attach additional sheet if	necessary.
Name	Business Address	City, State, Zip
		•
(5) Signature:	(6)	Date: 6/17/2023
(7) Type/Print Name: Tracy V	Nobley (8)	Date: 6/17/2023 Title: Dwner, President.

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30.00.

Sign and date this form and return to the address provided above.