

Due No Later Than November 30,

Return to:

SECRETARY OF STATE
700 WEST JEFFERSON
PO BOX 83720
BOISE, ID 83720-0080

NO FEE REQUIRED

* FIRST NOTICE *

1. Mailing Address - Please Correct, If Not Correct

PHYSICAL THERAPY CLINIC OF B
JANICE E LAWSON
1087 WEST RIVER STREET
SUITE 100
BOISE ID 83702

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1087 WEST RIVER STREET
SUITE 100
BOISE ID 83702

3. Organized Under the Laws of:

ID W 6052

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)

Office heldNameStreet or P.O. AddressCityStateZip

Aspen Rehabilitation
Associates, Inc.

7918 Zenith Drive

Citrus Heights CA 95621

5. Signature of New Registered Agent

6.

Signature

Name (Typed or Printed)

Eric Odegard

Date

9/30/98

Title

Member

ISSUED: 07-03-1998

3328

DO NOT TAPE OR STAPLE