

REINSTATEMENT

No. W 4515	Annual Report Form ADMIN DISSOLVED 11/08/2004		2. Registered Agent and Office NOT A P.O. BOX													
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	DIAGNOSTIC IMAGING SERVICE OF IDAHO JAMES J EVERSON 1951 BENCH RD STE F POCATELLO, ID 83201		JAMES J EVERSON 303 N OLD HWY 91 INKOM, ID 83245													
			3. <u>New</u> registered agent signature													
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) <table border="0"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Richard Everson</td> <td>737 E 16th</td> <td>Jerome</td> <td>ID</td> <td>83245</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Member	Richard Everson	737 E 16th	Jerome	ID	83245
Office held	Name	Street or P.O. Address	City	State	Zip											
Member	Richard Everson	737 E 16th	Jerome	ID	83245											
5. Organized under the laws of: IDAHO W 4515		6. Signature <i>James J. Everson</i> Date <i>11-15-04</i> Name (Printed) <u>James J Everson</u> Title <u>Owner</u>														

Issued 11/12/2004 by KAH

2004 NOV 24 AM 9:02

STATE OF IDAHO