

FILED EFFECTIVE

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CANCELLATION OF STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

11 JAN 20 AM 8:53

SECRETARY OF STATE
STATE OF IDAHO

To the Secretary of State of Idaho

Pursuant to the provisions of Sec. 53-3-1001(e) and Sec. 53-3-105(c), Idaho Code, the undersigned limited liability partnership states that it hereby cancels its statement of qualification as a limited liability partnership and for that purpose submits the following statement:

1. The name of the limited liability partnership is:

Aspen Physical Therapy and Worksite Solutions, LLP

2. The name which it used in Idaho is:

Aspen Physical Therapy and Worksite Solutions, LLP

3. It revokes the authority of its registered agent in the State of Idaho to accept service of process and consents that service of process in any action, suit or proceeding based upon any cause of action arising in the State of Idaho during the time it was authorized to transact business therein may thereafter be made on it by registered or certified mail to the limited liability partnership at the address listed in item 4 below.

4. The post office address to which process against the limited liability partnership may be mailed is

1800 Flandro Drive, Suite 190

Pocatello, ID 83202

Signature of at least 2 partners:

1) Brandi L. Scott, MPT

Typed Name Brandi L. Scott, MPT

2) Bart W. McDonald, MPT

Typed Name Bart W. McDonald, MPT

3)

Typed Name

Secretary of State use only

Notarized by Notary Public

IDAHO SECRETARY OF STATE
01/20/2011 05:00
CK: 2613 CT: 254567 BH: 1256219
1 @ 30.00 = 30.00 WDRML LLP # 2

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