

No. <b>W 149366</b>	<b>Due no later than Mar 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		BRYAN C MASON 4037 MOUNTAIN VISTA LN FILER ID 83328			
	BRYAN MASON MD PLLC R. COLE PARKER 1020 MAIN ST BUHL ID 83316		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	BRYAN C MASON	4037 MOUNTAIN VISTA LN	FILER	ID	USA	83328
5. Organized Under the Laws of:  <b>ID</b> <b>W 149366</b>	6. Annual Report must be signed.*					
		Signature: R. Cole Parker	Date: 02/04/2016			
		Name (type or print): R. Cole Parker	Title: CPA			
Processed 02/04/2016		* Electronically provided signatures are accepted as original signatures.				