No. W 77493		Due no later than Sep 30, 2011	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	RONALD G				
SECRETARY OF STATE	1. Mailin	1. Mailing Address: Correct in this box if needed. SUN VALLEY PHARMA CONSULT LLC RONALD G BROWNE 102 MIZER GULCH RD HAILEY ID 83333		102 MIZER GULCH RD HAILEY ID 83333			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	RONALD (
	HAILEY ID			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Er	ter Names and Addre	esses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER RONALD G BROWNE		102 MIZER GULCH RD	HAILEY	ID	USA	83333	
5. Organized Under the Laws of: 6. Annu		port must be signed.*					
ID	Signature	Signature: Ron Browne		Date: 07/14/2011			
W 77493	Name (typ	Name (type or print): Ron Browne		Title: Managing Director			
Processed 07/14/2011	* Electronical	* Electronically provided signatures are accepted as original signatures.					