

No. W 59776 Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 05/05/2010 1. Mailing Address: Correct in this box if needed. TIMOTHY FLOYD, MD PLLC CHARLES TIMOTHY FLOYD PO BOX 3229 HAILEY ID 83333	2. Registered Agent and Office (NOT A P.O. BOX) CHARLES TIMOTHY FLOYD 10 HERONWOOD RD BELLEVUE ID 83313 3. New Registered Agent Signature.														
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"><thead><tr><th>Office Held</th><th>Name</th><th>Street or PO Address</th><th>City</th><th>State</th><th>Country</th><th>Postal Code</th></tr></thead><tbody><tr><td>President</td><td>Timothy Floyd</td><td>PO Box 3229</td><td>Hailey</td><td>ID</td><td>Blaine</td><td>83333</td></tr></tbody></table>			Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Timothy Floyd	PO Box 3229	Hailey	ID	Blaine	83333
Office Held	Name	Street or PO Address	City	State	Country	Postal Code										
President	Timothy Floyd	PO Box 3229	Hailey	ID	Blaine	83333										
5. Organized Under the Laws of: IDAHO W 59776	6. Signature: <u>Timothy Floyd</u> Date: <u>6/13/10</u> Name (type or print): <u>TIMOTHY FLOYD</u> Title: <u>President</u>															
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