No. <b>W 88249</b>		Due no later than Nov 30, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF		Annual Report Form  1. Mailing Address: Correct in this box if needed.  KOOTENAI URGENT CARE, LLC  ADAM C JONES  700 IRONWOOD DR  SUITE 220E  COEUR D'ALENE ID 83814		ERIC KOELSCH 700 IRONWOOD DR SUITE 220E COEUR D'ALENE ID 83814  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.					
Office Held	Name	nes and Addresses of a	Street or PO Address	City	State	Country	Postal Code
MANAGER ADAM C JONES		700 IRONWOOD DR SUITE 220E	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID W 88249		Signature: Adam Jones		Date: 09/18/2017			
		Name (type or print): Adam Jones		Title: CFO			
Processed 09/18/2017		Electronically provided signatures are accepted as original signatures.					