

No. W 146466		Due no later than Jan 31, 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 RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. TRUVISION HEALTH, LLC TRUVISIN HEALTH LLC 12162 S. BUSINESS PARK DR. STE 114 DRAPER UT 84020 USA		DAVID BAILEY 2275 BALTIC AVE IDAHO FALLS ID 83404			
				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	DEREK L BAILEY	1662 E 6600 S UNIT 5	MURRAY	UT	USA	84121	
MEMBER	SHAWN C GIBSON	699 N 165 W	CENTERVILLE	UT	USA	84014	
MEMBER	TRAVIS B MARTIN	2658 N CYPRESS	LEHI	UT	USA	84043	
MEMBER	MATTHEW C WATHEN	337 W CIMARRON AVE	SARATOGA SPRINGS	UT	USA	84045	
MEMBER	BOYD WATHEN	7045 W 9600 N	LEHI	UT	USA	84043	
MEMBER	DAVID BROWN	1809 W 7600 S UNIT E303	WEST JORDAN	UT	USA	84084	
5. Organized Under the Laws of: UT W 146466		6. Annual Report must be signed.* Signature: Chad John Name (type or print): Chad John Date: 03/21/2017 Title: Assistant Controler					
Processed 03/21/2017		* Electronically provided signatures are accepted as original signatures.					