| No. W 41347 | | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|-----------------------------------|--|--|---|--|---------|----------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. MEDISOL, LLC SANDRA R. EMBURY 6796 S. RED SHINE WAY Boise Id 83709 USA mes and Addresses of at least one Member or Manager. | | 6796 S. RE | SANDRA R EMBURY 6796 S. RED SHINE WAY Boise ID 83709 | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Regist | 3. <u>New</u> Registered Agent Signature:* | | | |
| Office Held | Name | illes and Address | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER MEMBER | SANDRA R. EMBURY JOHN W EMBURY | | 6796 S. RED SHINE WAY 6796 S. RED SHINE WAY | BOISE BOISE | ID ID | Country | 83709 83709 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 41347 | | Signature: John Embury | | | Date: 08/10/2018 | | | |
| | | Name (type | | Title: Member | | | | |
| Processed 08/10/2018 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |