No. W 90158		Due no later than Jan 31, 2018		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			RODNEY E EVANS DVM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. EVANS VETERINARY CLINIC PLLC RODNEY E EVANS 111 LEESBURG LN CHALLIS ID 83226			111 LEESBURG LN CHALLIS ID 83226 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses of a	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	RODNEY E	EVANS	111 LEESBURG LN		CHALLIS	ID	USA	83226
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 90158		Signature: Rodney E Evans			Date: 11/26/2017			
		Name (type or print): Rodney E Evans			Title: member			
Processed 11/26/2017	* Electronically provided signatures are accepted as original signatures.							