

No. W 122996		Due no later than Mar 31, 2015		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		1. Mailing Address: Correct in this box if needed. OPTIMUM PHYSICAL THERAPY & REHABILITATION SERVICES, PLLC JOSEPH M WIGHT II 11061 BENT WILLOW LANE IDAHO FALLS ID 83401		JOSEPH M WIGHT II 11061 BENT WILLOW LANE IDAHO FALLS 83401			
				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	KIRA JO WIGHT	11061 N BENT WILLOW LN	IDAHO FALLS	ID	USA	83401	
MANAGER	JOSEPH M WIGHT II	11061 N BENT WILLOW LN	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: ID W 122996		6. Annual Report must be signed.* Signature: Joseph Wight Name (type or print): Joseph Wight					
		Date: 03/14/2015 Title: Owner, manager					
Processed 03/14/2015		* Electronically provided signatures are accepted as original signatures.					