

No. <b>W 140826</b>		<b>Due no later than Aug 31, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  ADVANCED CLINICAL INTEGRATION, LLC SARAH DACCARETT 1850 TRAVERTINE WAY BOISE ID 83712		MARCOS DACCARETT, MD 1850 TRAVERTINE WAY BOISE ID 83712			
				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	
MANAGER	SARAH DACCARETT	1850 TRAVERTINE WAY	BOISE	ID	USA	83712	
5. Organized Under the Laws of:  <b>ID W 140826</b>		6. Annual Report must be signed.* Signature: Sarah Daccarett Name (type or print): Sarah Daccarett Date: 07/01/2015 Title: Owner					
Processed 07/01/2015		* Electronically provided signatures are accepted as original signatures.					