No. W 110334		Due no later than Jan 31, 2016		2. Regi	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			DANNY L DAVIS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. TETON CARDIOVASCULAR IMAGING LLC MARK L MILLER 2001 S WOODRUFF 12B		IDAI	2001 S WOODRUFF STE 20 IDAHO FALLS ID 83404 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		IDAHO FALLS ID 83404-6372						
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City		State	Country	Postal Code
MEMBER MARK L. MILLER		ILLER	1897 DEER VALLEY	IDAHO	O FALLS	ID	USA	83401
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: MARK MILLER			Date: 01/26/2016			
W 110334		Name (type or print): MARK MILLER			Title: MEMBER			
Processed 01/26/2016 * Electronically provided signatures are accepted as original signatures.								