No. W 127497		Due no later than Jul 31, 2015		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			AMY PARSLOW			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JASON P. RICHARDS, M.D., PLLC		98	2240 E CENTER STREET POCATELLO ID 83201			
		AMY PARSLOW 2240 E CENTER ST POCATELLO ID 83201		3.	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	C	ity	State	Country	Postal Code
MEMBER JASON RICH		HARDS	2240 E CENTER STREET	P	OCATELLO	ID	USA	83201
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jason Richards			Date: 05/26/2015			
W 127497		Name (type or print): Jason Richards			Title: member			
Processed 05/26/2015 * Electronically provided signatures are accepted as original signatures.								