No. W 93276		Due no later than May 31, 2014 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RX INQUIRY, LLC RAULO S FREAR 550 E PARKWAY CT BOISE ID 83706 USA			RAUO S FREAR 550 E PARKWAY CT BOISE ID 83706 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE		USA						
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
MANAGER	RAULO S FREAR		550 E PARKWAY CT		BOISE	ID	USA	83706-6523
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 93276		Signature: Raulo S. Frear			Date: 06/19/2014			
		Name (type or print): Raulo S. Frear			Title: Manager			
Processed 06/19/2014 * Electronically provided signatures are accepted as original signatures.								