

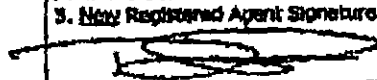
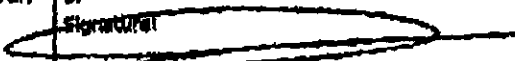
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No. W 18262 RETURN TO: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0680 REINSTATEMENT FEE DUE: \$30.00	Reinstatement Annual Report Form ADMIN DISSOLVED 06/08/2010 1. Mailing Address Correct in this form if needed. O.S.S.M. LANDHOLDING, L.L.C. 850 IRONWOOD DR STE 202 COEUR D'ALENE ID 83814		2. Registered Agent and Office (NOT A P.O. BOX) ADAM J. DISCAMP - Roger C. Dunteman 850 IRONWOOD DR STE 202 COEUR D'ALENE ID 83814 3. New Registered Agent Signature. 																											
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager ☐ Member ☒</td> <td>Douglas McInnis, MD.</td> <td rowspan="4">850 W. Ironwood Dr. #202 Coeur d'Alene, ID. 83814</td> <td rowspan="4"></td> <td rowspan="4"></td> <td rowspan="4"></td> <td rowspan="4"></td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>Adam Discamp, MD.</td> </tr> <tr> <td>Manager ☐ Member ☐</td> <td></td> </tr> <tr> <td>Manager ☐ Member ☒</td> <td>William Sims, MD.</td> </tr> <tr> <td colspan="7"> 1. Roger Dunteman, M.D. </td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager ☐ Member ☒	Douglas McInnis, MD.	850 W. Ironwood Dr. #202 Coeur d'Alene, ID. 83814					Manager ☐ Member ☒	Adam Discamp, MD.	Manager ☐ Member ☐		Manager ☐ Member ☒	William Sims, MD.	1. Roger Dunteman, M.D.						
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5. Organized Under the Laws of: IDAHO W 18262		6. Signature:  Name (type or print): <u>Roger C. Dunteman</u> Date: <u>6/29/15</u> Title: <u>MD</u>																												