No. <b>W 119552</b>	Due no later than Dec 31, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		The state of the s	HEATHER NASKER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  AISLING ANESTHESIA, LLC HEATHER JOYCE NASKER 746 S. JARBIDGE AVE			746 S. JARBIDGE AVE MIDDLETON ID 83644			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			MIDDLETON	PRIDELLION ID 050TT			
	MIDDLETON ID 83644		3. <u>New</u> Register	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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 HEATHER JOYCE NASKER 746 S. JARBIDGE AVE		MIDDLETON	ID	USA	83644		
Organized Under the Laws of:  6. Annual Report must be signed.*							
ID	Signature: Heat		Date: 10/22/2015				
W 119552	Name (type or print): Heather J. Nasker			Title: CRNA			
Processed 10/22/2015	* Electronically provided signatures are accepted as original signatures.						