

No. W 169746		Due no later than Jul 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ANDREW C. NELSON, MD LLC 4505 N VILLA RIDGE WAY BOISE ID 83703		ANDREW C NELSON 4505 N VILLA RIDGE WAY BOISE ID 83703-8370			
				3. <u>New</u> Registered Agent Signature:*			
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	AND CREIGHTON NELSON	4505 N VILLA RIDGE WAY	BOISE	ID	USA	83703	
5. Organized Under the Laws of: ID W 169746		6. Annual Report must be signed.* Signature: Andrew Nelson Name (type or print): Andrew Nelson Date: 08/23/2017 Title: Owner					
Processed 08/23/2017		* Electronically provided signatures are accepted as original signatures.					