SECRETARY OF STATE 700 WEST SEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED * FIRST NOTICE * 4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Presided Predo Mark Arelo 2612 Basas Ba	No. C107295		u <mark>al Report Form</mark> ater Than November 30.		2. Registered Agent			
PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED ** FIRST NOTICE ** 30 ISE ** FIRST NOTICE ** 30 ISE ** Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held ** President Orector ** First Notice ** 30 ISE ** Director ** First Notice ** 30 ISE ** First Notice ** 30 ISE ** Director ** First Notice ** 30 ISE ** First Notice ** 30 ISE ** Director ** First Notice ** 30 ISE ** Director ** First Notice ** 30 ISE ** Director ** First Name ** ID 83732 ** City ** State ** Zie ** First Director ** First Name ** Street or P.O. Address ** City ** State ** Zie ** First Director ** Director ** State ** Zie ** President Director ** Director ** State ** Zie ** Director ** First Director ** State ** Zie ** Director ** Director ** State ** Zie ** Director ** State ** Zie ** Director ** Director ** State ** Zie ** Director ** State ** Zie ** Director ** State ** Zie ** Director ** Director ** State ** Zie ** Director ** State ** Zie ** Director ** Dire	SECRETARY OF STATE				NICHOLAS SCOTT GRIDLEY 2612 BOGUS BASIN RD			
* FIRST NOTICE * 30ISE ID 83702 ID C107296 Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held President Prector Mark Arek 2612 Basas Basas Pa	PO BOX 83720	NICHOLAS SC	NICHOLAS SCOTT GRIDLEY			10	83702	
Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address President Predict Mark Arcki 2612 Basias Basia PA Basia In 8372 Lipited Predict Mark Arcki 2612 Basias Basia Ra Brise In 8372 Director Elle Grubshov 9140 Wilthick Busse In 8372 Secretary Samuel Hoasland 1088 N Cale Pal #200 Basias In 8372 NATURE OF BUSINESS RETAIL PHARMACY One of Printed Park In Samuel Begort has been examined by me and is to the best of me knowledge true, calculation complete. Signature Date President Title President Name (Typed or Printed) Name (Typed or Printed) Title President Title President	NO FEE REQUIRED	2012 30403				3. Organized Under the Laws of:		
Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one) Office held Name Street or P.O. Address City State Zip Presided Director Mark Arek: 2612 Basas Basa PA Basis In 8372 Opens / director Michela, Gridley 2612 Basas Basa Ra Briss In 8372 Director Elle Grobshov 9140 Witholk Basis In 8372 Secretary Samuel Hoasland 1088 N Cole PA +200 Basis In 8370 NATURE OF BUSINESS RETAIL PHARMACY One of Managers or Members (check one) Managers or Managers or Members (check one) Managers or Membe	* FIRST NOTICE *	BOISE	ID 837	52	ID	010	7296	
Director Sile Gribshov 9140 Wilstick Buse In 8372 Secretary Samuel Hogsland 1088 N Cole Rd #200 Buse In 8372 NATURE OF BUSINESS RETAIL PHARMACY Name (Typed or Name (Typed or Printed)) Name (Typed or Name (Typed or Name (Typed or Printed)) Name (Typed or Name (Typed or Name (Typed or Printed)) Name (Typed or Name (Typed or Name (Typed or Printed))					(check one)			
Director Sile Gribshov 9140 Wilstick Busic In 8372 Secretary Samuel Hogsland 1088 N Cole Pol #200 Busic, In 8376 NATURE OF BUSINESS RETAIL PHARMACY Name Printed) Name Printed Residence Susse S	Office held Name President Director Manual	Arck 2	reet or P.O. Address	L PA	City - Books	State	<u>Zip</u> 8370	
Secretary Samuel Hogsland 1088 N Cole Pol #200 Roise ID 837 NATURE OF BUSINESS RETAIL PHARMACY 6. I certify that this Anguel Report has been examined by me and is to the best of me knowledge true, certesty and complete. Signature Name (Typed or Printed) Name (Typed or Printed) Name Printed) Title	-pres/directs. Nich.	la, Gridley 2	.612 Bagas Bo	is a Rd				
NATURE OF BUSINESS 6. I certify that this Anguel Report has been examined by me and is to the best of me knowledge true, correct and complete. Signature Name (Typed or Printed) Name (Typed or Printed)	Director Elle	Archshov 9	140 W llotte	le				
NATURE OF BUSINESS knowledge true, correct and complete. Signature Name (Typed or Printed) Name (Typed or Printed)	Secretary Samu	el Hogsland 1	088 N Cole Rd	#200	Buise,	エク	8,3704	
NATURE OF BUSINESS knowledge true, cattlett and complete. Signature Name (Typed or Printed) Name (Typed or Printed)								
RETAIL PHARMACY Signature Name (Typed or Printed) Name (Typed or Printed) Title		6. certif	y that this Annual Bend	t has been e			•	
Name (Typed or Mark Arck) Title President	MAIDE OF BUSINES		Signature ///////			Date		
ISSUED: 37-06-1995 17997	RETAIL PHARMACY		The state of	Arcki	Title Preside			
	ISSUED: 37-06-19	95	•			17997		