No. W 64843		Due no later than Jul 31, 2013		2. Registered Agent and Address (NO PO BOX)											
Return to:		Annual Report Form		BRENT KENNEDY 2335 S PTARMIGAN IDAHO FALLS ID 83401 3. New Registered Agent Signature:*											
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. FOOTHILLS REHABILITATION & PERFORMANCE SERVICES, PLLC BRENT S KENNEDY 2335 S PTARMIGAN IDAHO FALLS ID 83401 USA													
								4. Limited Liability Comp	anies: Enter Na	mes and Address	ses of at least one Member or Manager.				
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER MANAGER	BRENT KENN MICHAEL AN		2335 S PTARMIGAN 3915 LAURA CIRCLE	IDAHO FALLS AMMON	ID ID	USA USA	83401 83406								
5. Organized Under the Laws of:		6. Annual Report must be signed.*													
ID W 64843		Signature: Brent Kennedy		Date: 05/17/2013											
		Name (type or print): Brent Kennedy		Title: Manager											
Processed 05/17/2013 * Electronically provided signatures are accepted as original signatures.															