

No. W 70711	Due no later than Jan 31, 2009 Annual Report Form		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. K3 MEDICAL PLLC PO BOX 7156 BOISE ID 83707-1156		JOSEPH S KOZLOWSKI 3101 W MAIN ST STE 200 BOISE ID 83702			
			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	RONALD M KRISTENSEN	2219 CLAREMONT DR	BOISE	ID	USA	83702
5. Organized Under the Laws of: ID W 70711	6. Annual Report must be signed.* Signature: Joseph S. Kozlowski Name (type or print): Joseph S. Kozlowski		Date: 11/26/2008 Title: Registered Agent			
Processed 11/26/2008		* Electronically provided signatures are accepted as original signatures.				