No. <b>W 87504</b>	Due no later than Oct 31, 2014		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		EDWIN M TINGSTAD				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		10000000 000000 00000 00000 00000	2500 WEST A STREET #201 MOSCOW ID 83843			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	EDWIN M. TINGSTAD, M.D., PLLC DAVID TINGSTAD 143 3RD AVE SOUTH STE 200		Prosecow ID 63643				
	EDMONDS WA 98020		3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Na	ames and Addresses of	f at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER EDWIN TINGSTAD		2500 WEST A STREET STE 200	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of:	Organized Under the Laws of:  6. Annual Report must be signed.*						
WA	Signature: David Tingstad		Date: 09/10/2014				
W 87504	Name (type or print): David Tingstad		Title: Authorized Agent				
ocessed 09/10/2014 * Electronically provided signatures are accepted as original signatures.							