

No. <b>W 28521</b>		<b>Due no later than Feb 28, 2011</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> RIVER MEDICAL GROUP PLLC MICHAEL R MINAS MD 100 W COTTONWOOD CT STE 150 EAGLE ID 83616		CHAS F MCDEVITT 420 W BANNOCK ST 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	
MEMBER	MICHAEL R MINAS MD	P.O BOX 1909	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  <b>ID W 28521</b>		6. Annual Report must be signed.* Signature: Michael R Minas, MD Name (type or print): Michael R Minas, MD				Date: 03/07/2011 Title: President	
Processed 03/07/2011		* Electronically provided signatures are accepted as original signatures.					