No. W 29587		Due no l	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		ALLYSON BUI	ALLYSON BURNHAM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		444 HOSPITAL WAY STE 555 POCATELLO ID 83201 3. New Registered Agent Signature:*				
		SUB CITY: POCATELLO 1, LLC ALLYSON BURNHAM 444 HOSPITAL WAY STE 555 POCATELLO ID 83201						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companie	es: Enter Nar	mes and Addresses of a	least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
		STUART ROSSITER	435 S 19TH	POCATELLO	ID	USA	83201	
MEMBER BILLY B ISLE			444 HOSPITAL WAY, SUITE 555	POCATELLO	ID	USA	83201	
MEMBER	BRAD FRASI	JKE	444 HOSPITAL WAY, SUITE 555	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 29587		Signature: Billy B Isley		Date: 03/16/2011				
		Name (type or print): Billy B Isley		Title: Member				
Processed 03/16/2011 * Electronically provided signatures are accepted as original signatures.								