

No. W 96874	Due no later than Oct 31, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) Need to Appoint <i>Launa Janssen-Campbell</i> 445 Bennington Canyon Rd Montpelier, ID 83254
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. SUNRISE MIDWIFERY SERVICES, LLC LAUNA JANSSEN-CAMPBELL 445 BENNINGTON CANYON RD MONTPELIER ID 83254		3. <u>New</u> Registered Agent Signature. <i>Launa Janssen-Campbell</i>

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Launa Janssen Campbell	445 Bennington Canyon Rd	Montpelier	ID	Bear Lake	83254
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold;">IDAHO W 96874</div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature: <i>Launa Janssen-Campbell</i> Name (type or print): LAUNA JANSSEN-CAMPBELL </td> <td style="width: 40%;"> Date: Sept 19, 2016 Title: MANAGER/owner </td> </tr> </table>	Signature: <i>Launa Janssen-Campbell</i> Name (type or print): LAUNA JANSSEN-CAMPBELL	Date: Sept 19, 2016 Title: MANAGER/owner
Signature: <i>Launa Janssen-Campbell</i> Name (type or print): LAUNA JANSSEN-CAMPBELL	Date: Sept 19, 2016 Title: MANAGER/owner		

Issued 09/13/2016 by KAH

123705