

No. W 72292		Due no later than Mar 31, 2013		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. MOORE MEDICAL LLC 1690 NEW BRITAIN AVE SUITE 400 FARMINGTON CT 06032		PRENTICE-HALL CORPORATION SYST 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA	
				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	WILLIE C BOGAN	ONE POST STREET	SAN FRANCISCO	CA	USA 94104
5. Organized Under the Laws of: DE W 72292		6. Annual Report must be signed.* Signature: Willie C. Bogan Name (type or print): Willie C. Bogan Date: 02/25/2013 Title: Manager			
Processed 02/25/2013		* Electronically provided signatures are accepted as original signatures.			