No. W 129207		Due no later than Sep 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CORPORATION SERVICE COMPANY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BEST OF SOUTHEAST IDAHO EMERGENCY PHYSICIANS, PLLC 6200 S SYRACUSE WAY, STE 200 GREENWOOD VILLAGE CO 80111		12550 W EXPLORER DR STE 100 BOISE ID 83713 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held Nan	me		Street or PO Address	City	State	Country	Postal Code
MEMBER PREMIER EMERGEI OF ID MEDICAL GR		ERGENCY PHYSICIANS AL GROUP	6200 S SYRACUSE WAY, STE 200	GREENWOOD VILLAGE	СО	USA	80111
5. Organized Under the Laws of:		6. Annual Report must b					
ID		Signature: JOSEPH H	Date: 09/02/2015				
W 129207		Name (type or print):	Title: SECRETARY				
Processed 09/02/2015	* Electronically provided signatures are accepted as original signatures.						