

No. <b>W 70256</b>		<b>Due no later than Jan 31, 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>  BITTERROOT REGIONAL CHIROPRACTIC PLLC BRIAN A BARRY 1911 MAIN ST SALMON ID 83467		TRACY MASCIA 818 MAIN ST STE F SALMON ID 83467			
				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	BRIAN A BARRY	1911 MAIN ST	SALMON	ID	USA	83467	
5. Organized Under the Laws of:  <b>ID W 70256</b>		6. Annual Report must be signed.* Signature: Brian A Barry DC Name (type or print): Brian A Barry DC					
Date: 12/03/2010 Title: Sole Member							
Processed 12/03/2010		* Electronically provided signatures are accepted as original signatures.					