

No. W 111211		Due no later than Feb 28, 2018		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		1. Mailing Address: Correct in this box if needed. PAIN TREATMENT SPECIALTIES LLC BRIAN TIBBETS 1350 POMERELLE AVE BURLEY ID 83318		BRIAN TIBBETS 1350 POMERELLE AVE BURLEY ID 83318			
				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 TIBBETS	312 S 950 W	HEYBURN	ID	USA	83336	
5. Organized Under the Laws of: ID W 111211		6. Annual Report must be signed.* Signature: Carolyn Shoemaker Name (type or print): Carolyn Shoemaker				Date: 01/03/2018 Title: Controller	
Processed 01/03/2018		* Electronically provided signatures are accepted as original signatures.					