

No. <b>W 112520</b>	<b>Due no later than Mar 31, 2014</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  IDAHO PATHOLOGY LABORATORY PHYSICIANS, PLLC KRISTOPHER MCGEE MD 7069 RUNNING IRON LN POCATELLO ID 83204		KRISTOPHER MCGEE MD 7069 RUNNING IRON LN POCATELLO ID 83204				
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name ROSHAN PATEL	Street or PO Address 451 BRASSIE CIR	City POCATELLO	State ID	Country USA	Postal Code 83204	
5. Organized Under the Laws of:  <b>ID</b> <b>W 112520</b>	6. Annual Report must be signed.*  Signature: Kristopher McGee Name (type or print): Kristopher McGee						Date: 02/04/2014 Title: Registered agent
Processed 02/04/2014	* Electronically provided signatures are accepted as original signatures.						