

No. W 91739	Due no later than Mar 31, 2014 Annual Report Form	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. PALOUSE IMAGING CONSULTANTS, PLLC CHRISTIN S REISENAUER MD PO BOX 9583 MOSCOW ID 83843	JAMES L WESTBERG 401 E VEATCH ST MOSCOW ID 83843				
		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	CHRISTIN S REISENAUER	3240 N MOUNTAIN VIEW	MOSCOW	ID	USA	83843
5. Organized Under the Laws of: ID W 91739	6. Annual Report must be signed.* Signature: Christin S Reisenauer Name (type or print): Christin S Reisenauer Date: 02/01/2014 Title: Member					
Processed 02/01/2014		* Electronically provided signatures are accepted as original signatures.				