

No. J 1251		Due no later than Feb 28, 2011		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. IDAHO KIDNEY INSTITUTE, LLP JEFFREY D CLARK CPA PO BOX 986 BLACKFOOT ID 83221 USA		FAHIM RAHIM 444 HOSPITAL WAY STE 607 POCATELLO ID 83201			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Partnerships: Enter Names and Business Addresses of two (2) or more partners.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PARTNER	FAHIM RAHIM	444 HOSPITAL WAY BUILDING 2	POCATELLO	ID	USA	83201	
PARTNER	FAHIM RAHIM	444 HOSPITAL WAY STE 607	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: ID J 1251		6. Annual Report must be signed.* Signature: Jeffrey Clark Name (type or print): Jeffrey Clark					
		Date: 12/11/2010 Title: Cpa					
Processed 12/11/2010		* Electronically provided signatures are accepted as original signatures.					