No. W 59383	Due no later than Feb 28, 2017			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			450 E MAIN REXBURG II	RACHAEL GONZALES 450 E MAIN ST REXBURG ID 83440-0310 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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	
MANAGER BOARD OF MEMORIAL I	TRUSTEES OF MADISON HOSPITAL	450 E MAIN ST	REXBURG	ID		83440-0310	
5. Organized Under the Laws of:	d Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: MICHAEL HODEL		Date: 02/13/2017				
W 59383	Name (type or print):		Title: MANAGER				
Processed 02/13/2017	* Electronically provided signatures are accepted as original signatures.						