No. W 73874	Due no later than May 31, 2017		2. Registered Agent and Address (NO PO BOX)				
Return to:	Ann	Annual Report Form		CINDY M STICE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	AHC MEDICAL SUPPL DAVID CHARLES 10520 SOUTH 700 E		215 N WHITLEY DR STE 1 FRUITLAND ID 83619				
NO FILING FEE IF RECEIVED BY DUE DATE	SUITE 210 SANDY UT 84070 USA	SANDY UT 84070		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	
			SANDY SANDY	UT UT	USA USA	84070 84070	
5. Organized Under the Laws of: 6. Annual Report must be signed.*		be signed.*					
ID	ID Signature: David Charles		Date: 06/19/2017				
W 73874	Name (type or print): David Charles		Title: President				
Processed 06/19/2017	* Electronically provided signatures are accepted as original signatures.						