

No. W 109778		Due no later than Jan 31, 2017 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		1. Mailing Address: Correct in this box if needed. STERLING HEALTHCARE MANAGEMENT, LLC SCOTT BROWN 740 S WOODRUFF AVE IDAHO FALLS ID 83401		SCOTT BROWN 740 S WOODRUFF AVE IDAHO FALLS ID 83401			
NO FILING FEE IF RECEIVED BY DUE DATE				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	SCOTT BROWN	126 RIDGECREST DRIVE #7672	STAR VALLEY RANCH	WY	USA	83127	
5. Organized Under the Laws of: ID W 109778		6. Annual Report must be signed.* Signature: Scott Brown Name (type or print): Scott Brown Date: 01/04/2017 Title: MANAGER					
Processed 01/04/2017 * Electronically provided signatures are accepted as original signatures.							