No. C 74512		D	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. PROFESSIONAL PLAZA, INC. CLAUDINE M BAISCH 526A SHOUP AVE W TWIN FALLS ID 83301-5050		526 A SHOUP TWIN FALLS	CHRISTOPHER SCHOLES, MD 526 A SHOUP AVE WEST TWIN FALLS ID 83301-5050 3. New Registered Agent Signature:*			
200	Names and Busin	ess Addresses of	f President, Secretary, and Directors. Trea					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY	CLAUDINE N	1 BAISCH	526 A SHOUP AVE W	TWIN FALLS	ID	USA	83301-5050	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 74512		Signature: C		Date: 02/05/2017				
		Name (type		Title: RN				
Processed 02/05/2017		* Electronically	provided signatures are accepted as origina	al signatures.				