

No. W 27509	Reinstatement Annual Report Form ADMIN DISSOLVED 03/30/2015		2. Registered Agent and Office (NOT A P.O. BOX) R TYLER FRIZZELL																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 <i>4/8/15</i> <i>#2424</i> REINSTATEMENT FEE DUE: \$30.00			1. Mailing Address: Correct in this box if needed. ROY TYLER FRIZZELL, M.D., PLLC R TYLER FRIZZELL 222 N 2ND ST STE 307 BOISE ID 83702 USA	222 N 2ND ST STE 307 BOISE ID 83702																																		
3. <u>New</u> Registered Agent Signature.																																						
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>R. TYLER FRIZZELL</td> <td>222 N 2ND ST STE 307</td> <td>BOISE</td> <td>ID</td> <td>USA</td> <td>83702</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	R. TYLER FRIZZELL	222 N 2ND ST STE 307	BOISE	ID	USA	83702	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 27509	6. Signature: <i>R. Tyler Frizzell</i> Name (type or print): <u>R. TYLER FRIZZELL</u>			Date: <u>4/8/15</u> Title: <u>MEMBER</u>																																		

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INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM