

No. W 183901		Due no later than May 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. SENSOR MEDICA USA LLC KENDON HOWARD 966 LINCOLN RD STE C IDAHO FALLS ID 83401		KENDON HOWARD 2966 ESCALANTE AVE IDAHO FALLS ID 83404			
				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	KENDON I HOWARD	2966 ESCALANTE AVE.	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of: ID W 183901		6. Annual Report must be signed.* Signature: Kendon Howard Name (type or print): Kendon Howard Date: 05/29/2018 Title: CEO					
Processed 05/29/2018		* Electronically provided signatures are accepted as original signatures.					