No. W 83878		Due no later than May 31, 2011		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			STEVE A WALLACE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MEDICAL MARKETING NORTHWEST, LLC STEVE A WALLACE 3629 EASTGATE DRIVE BOISE ID 83716		BOISE ID	3629 EASTGATE DRIVE BOISE ID 83716 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	oanies: Enter Nai	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	STEVE A WALLACE		3629 EASTGATE DRIVE	BOISE	ID	USA	83716	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 83878		Signature: Ste		Date: 05/31/2011				
		Name (type o		Title: Owner				
Processed 05/31/2011 * Electronically provided signatures are accepted as original signatures.								