

No. W 29997		Due no later than Apr 30, 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. HUMAN DYNAMICS AND DIAGNOSTICS LLC STEVEN J WRIGHT PO BOX 50578 IDAHO FALLS ID 83405		STEVEN J WRIGHT 477 SHOUP AVE STE 109 IDAHO FALLS ID 83402			
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	
MANAGER	KERNS GROUP LLC	4 LADUE HILLS DR PKWY	ST LOUIS	MO	63132		
MANAGER	SKJ LLC	1706 MARY ST	SALMON	ID	83467		
MANAGER	SOMMERTIME LLC	732 MOUNTAIN VIEW CIRCLE	SALMON	ID	83467		
MANAGER	MEDICAL PSYCHOTHERAPY	3760 WASHINGTON	IDAHO FALLS	ID	83404		
MANAGER	B-FOUR LLC	2054 HUGHES DR	IDAHO FALLS	ID	83402		
MANAGER	B FOUR, LLC	2054 HUGHES	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of: ID W 29997		6. Annual Report must be signed.* Signature: Steven J Wright Name (type or print): Steven J Wright					
		Date: 03/01/2017 Title: Agent					
Processed 03/01/2017		* Electronically provided signatures are accepted as original signatures.					