

No. <b>W 127403</b>		<b>Due no later than Jul 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  BOISE DIALYSIS PARTNERS II, LLC ATTN TAX DEPT 920 WINTER ST WALTHAM MA 02451		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705	
				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
MEMBER	PAUL COLANTONIO	920 WINTER ST	WALTHAM	MA	USA
Postal Code 02451					
5. Organized Under the Laws of:  <b>DE W 127403</b>		6. Annual Report must be signed.* Signature: PAUL COLANTONIO Name (type or print): PAUL COLANTONIO			
		Date: 07/19/2016 Title: ASST TREASURER			
Processed 07/19/2016		* Electronically provided signatures are accepted as original signatures.			