No. <b>W 114287</b> Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Due no later than May 31, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  ASSOCIATES FOR INPATIENT MEDICINE, LLC.  KRISTIN STREEPER 2860 CHANNING WAY, STE 213 IDAHO FALLS ID 83404		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)  KRISTEN STREEPER  2860 CHANNING WAY STE 213  IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
				2860 CHANNII IDAHO FALLS				
NO FILING RECEIVED BY 4. Limited Liability Col	DUE DATE	USA mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	JARED C M	ORTON	2860 CHANNING WAY	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
UT W 114287		Signature: Kristin Streeper		Date:	Date: 03/24/2014			
		Name (type or print): Kristin Streeper		Title:	Title: Executive Director			
Processed 03/24/2014	4	* Electronically p	rovided signatures are accepted as origina	al signatures.				