No. W 107183		Due no later than Oct 31, 2012		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. OASIS PEDIATRICS, PLLC CARRIE HUMPHREY 2258 N BIG SUMMIT WAY EAGLE ID 83616		2258 N BIG	CARRIE HUMPHREY 2258 N BIG SUMMIT WAY			
					EAGLE ID 83616 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		LAGLE ID 63	010	J. Heys	or ca rigent of	gridiarei		
4. Limited Liability Compa	anies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER CARRIE HUM		1PHREY	2258 N. BIG SUMMIT WAY	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Car		Date: 08/10/2012				
W 107183		Name (type or		Title: Manager				
Processed 08/10/2012 * Electronically provided signatures are accepted as original signatures.								