

No. <b>W 5915</b>		<b>Due no later than Apr 30, 2015</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  N.S. II, LLC LISA JOLLIFF 6140 W CURTISIAN AVE STE 400 BOISE ID 83704		TIMOTHY J JOHANS 6140 W CURTISIAN AVE STE 400 BOISE 83704			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
MEMBER	TIMOTHY J JOHANS	1075 CURTIS RD STE 200	BOISE	ID	83706		
MEMBER	PAUL J MONTALBANO MD	6140 W CURTISIAN STE 400 STE 200	BOISE	ID	83704		
MEMBER	MICHAEL J HAJJAR MD	6140 W CURTISIAN STE 400 STE 200	BOISE	ID	83704		
MEMBER	THOMAS MANNING MD	6140 W CURTISIAN AVE STE 400	BOISE	ID	USA	83704	
5. Organized Under the Laws of:  <b>ID W 5915</b>		6. Annual Report must be signed.*  Signature: Shawn Wrathall Name (type or print): Shawn Wrathall  Date: 03/19/2015 Title: Administration Manager					
Processed 03/19/2015 * Electronically provided signatures are accepted as original signatures.							