No. W 116327		Due no later than Aug 31, 2013	2. Registered Agent and Address (NO PO BOX) CHRISTOPHER M HARRISON 2100 NORTHWEST BLVD SUITE 400 COEUR D ALENE ID 83814 3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PAYNE FREE ANESTHESIA, PLLC ERIK PAYNE 1705 GOVERNMENT WAY COEUR D ALENE ID 83814				
NO FILING FEE IF RECEIVED BY DUE DATE						
200		mes and Addresses of at least one Member or Manager.			_	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER ERIK J PAYN		NE 1705 GOVERNMENT WAY	COEUR D'ALENE	ID	USA	83814
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Erik J. Payne, M.D.	Date: 06/24/2013			
W 116327		Name (type or print): Erik J. Payne, M.D.	Title: President			
Processed 06/24/2013 * Electronically provided signatures are accepted as original signatures.						