

No. <b>W 85546</b>		<b>Due no later than Jul 31, 2010</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>  ONLINE ACLS CERTIFICATION, LLC SHARON L SIMLER 110 N FRONT RD KAMIAH ID 83536		SHARON L SIMLER 110 N FRONT RD KAMIAH ID 83536			
<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 MANAGER	Name SHARON L SIMLER	Street or PO Address 110 N FRONT RD		City KAMIAH	State ID	Country USA	Postal Code 83536
5. Organized Under the Laws of:  <b>ID</b> <b>W 85546</b>		6. Annual Report must be signed.*  Signature: Sherry Simler Name (type or print): Sherry Simler  Date: 05/17/2010 Title: Owner					
Processed 05/17/2010      * Electronically provided signatures are accepted as original signatures.							