

No. W 12237		Due no later than Jun 30, 2017		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ORTHOPEDIC SURGERY CENTER OF IDAHO, LLC JULIE L TADDICKEN 6999 DESERT AVE BOISE ID 83709 USA		GIVENS PURSLEY CORPORATE SERVI 601 W BANNOCK ST BOISE ID 83702	
				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
MANAGER	DAVID M LAMEY	5395 N CATTAIL WAY	BOISE	ID	83203
5. Organized Under the Laws of: ID W 12237		6. Annual Report must be signed.* Signature: Julie Taddicken Name (type or print): Julie Taddicken Date: 04/30/2017 Title: Administrator			
Processed 04/30/2017		* Electronically provided signatures are accepted as original signatures.			