No. W 122161		Due no later than Feb 29, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ROBERT L CORAY			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. ROBERT L. CORAY MD, PLLC ROBERT L CORAY 31 NORTH 4000 WEST REXBURG ID 83440-5601		31 NORTH 4000 WEST REXBURG ID 83440			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ROBERT L						
	REXBURG II			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER ROBERT	EMBER ROBERT L CORAY		REXBURG	ID	USA	83440-5601	
5. Organized Under the Laws of:	Organized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: F	lobert L. Coray		Date: 01/18/2016			
W 122161	Name (type	or print): Robert L. Coray		Title: Member			
Processed 01/18/2016	* Electronically	* Electronically provided signatures are accepted as original signatures.					