No. <b>W 1790</b> Return to:		Due no later than Dec 31, 2012 Annual Report Form			Registered Agent and Address (NO PO BOX)  MICHAEL BERRY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  AMERICAN HEALTH VALUE, L.L.C.  MICHAEL BERRY  PO BOX 8063  BOISE ID 83707		BOISE ID	671 E RIVERPARK LN STE 100 BOISE ID 83706  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
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	WILLIAM T.	TERRY	464 W ASHBOURNE DRIVE	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Fran Florez		Date: 11/	Date: 11/12/2012			
W 1790		Name (type or print): Fran Florez		Title: Op	Title: Operations Manager			
Processed 11/12/2012	Processed 11/12/2012 * Electronically provided signatures are accepted as original signatures.							