

No. W 112850	Due no later than Apr 30, 2013 Annual Report Form	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. SAFARI MEDICAL TRANSPORTATION LLC DADIRI NURO 122 N LATAH ST UNIT C BOISE ID 83706	DADIRI NURO 9088 W HUMANITY LN BOISE ID 83704				
		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	DADIRI NURO	9088 W HUMANITY LN	BOISE	ID	USA	83704
5. Organized Under the Laws of: ID W 112850	6. Annual Report must be signed.* Signature: Dadiri Nuro Name (type or print): Dadiri Nuro Date: 03/20/2013 Title: Owner					
Processed 03/20/2013		* Electronically provided signatures are accepted as original signatures.				