No. W 2670		Due no later than Jul 31, 2018		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MEDICAL ENTERPRISES, P.L.L.C. RICHARD K BELL MD 914 IRONWOOD DR STE 101 COEUR D ALENE ID 83814 RICHARD K BELL MD 914 IRONWOOD DR STE 101 3. New Registered Agent Signature:*						
NO FILING FEE IF RECEIVED BY DUE DATE								
Limited Liability Companies: Enter Nar Office Held Name		mes and Address	es of at least one Member of Manager. Street or PO Address	City	State	Country	Postal Code	
MEMBER RICHARD K BELL MEMBER BRADLEY DRURY			914 IRONWOOD DRIVE STE 101 914 IRONWOOD DRIVE STE 101	COEUR D'ALENE COEUR D'ALENE	ID	USA	83814 83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Terri Ahlf		Dat	Date: 05/28/2018			
W 2670		Name (type or print): Terri Ahlf		Title: Manager				
Processed 05/28/2018	3	* Electronically p	provided signatures are accepted as original	signatures.				