

No. W 83470		Due no later than Apr 30, 2014 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		1. Mailing Address: Correct in this box if needed. HOUSE DOCTOR L.L.C BRIAN WULF 3117 E 97 S IDAHO FALLS ID 83406		BRIAN WULF 3117 E 97 S IDAHO FALLS ID 83406			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name BRIAN P WULF	Street or PO Address 3117 E. 97 S.		City IDAHO FALLS	State ID	Country USA	Postal Code 83406
5. Organized Under the Laws of: ID W 83470		6. Annual Report must be signed.* Signature: Brian Wulf Name (type or print): Brian Wulf Date: 02/11/2014 Title: Manager					
Processed 02/11/2014 * Electronically provided signatures are accepted as original signatures.							