No. W 136363	Due no later than Apr 30, 2015		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. DR. CHRISTINE R. MALDONADO, PLLC DR. CHRISTINE MALDONADO 1109 E. STATE ST. BOISE ID 83712		DR. CHRISTINE MALDONADO 1109 E. STATE ST. BOISE ID 83712 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter Na	mes and Addresses of at					
Office Held Name		Street or PO Address	City	State	Country	Postal Code
MANAGER CHRISTINE RENEE MALDONADO 1109 E. STATE ST. BOISE					USA	83712
5. Organized Under the Laws of:	6. Annual Report must					
ID	Signature: Christine	Date: 05/22/2015				
W 136363	Name (type or print)	Title: Dr.				
Processed 05/22/2015	* Electronically provided signatures are accepted as original signatures.					