

No. W 141724		Due no later than Sep 30, 2016		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. MIRAI CLINICAL, LLC CHARLENE BRANNON 2493 BLAINE ROAD MOSCOW ID 83843		ALL DAY \$49 IDAHO REGISTERED A 1900 NORTHWEST BLVD STE 106A COEUR D ALENE ID 83814-8384			
				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	
MEMBER	KANAKO HAYASHI	1935 E GARVEY AVE N APT 56	WEST COVINA	CA	USA	91791-1463	
MANAGER	CHARLENE BRANNON	2493 BLAINE RD.	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of: DE W 141724		6. Annual Report must be signed.* Signature: Kanako Hayashi Name (type or print): Kanako Hayashi					
Processed 09/28/2016		Date: 09/28/2016 Title: Founder					
* Electronically provided signatures are accepted as original signatures.							