

No. W 76754	Due no later than Aug 31, 2009 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. RX FORM ASSIST LLC BURKE WEBSTER 2067 EAGLES HOMESTEAD DR IDAHO FALLS ID 83406		BURKE WEBSTER 2067 EAGLES HOMESTEAD DR IDAHO FALLS ID 83406			
			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	NATE BOYLE	P.O. BOX 52192	IDAHO FALLS	ID	USA	83405
MANAGER	BURKE WEBSTER	2067 EAGLES HOMESTEAD DRIVE	IDAHO FALLS	ID	USA	83406
5. Organized Under the Laws of: ID W 76754	6. Annual Report must be signed.* Signature: Burke Webster Name (type or print): Burke Webster		Date: 09/22/2009 Title: Vice President			
Processed 09/22/2009		* Electronically provided signatures are accepted as original signatures.				