

No. W 62509	Due no later than May 31, 2016 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. RISA VETERINARY SERVICES, LLC BRIAN RISA 306 W 175 N BLACKFOOT ID 83221		BRIAN RISA DVM 306 W 175 N BLACKFOOT ID 83221			
			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	BRIAN RISA DVM	306 W 175 N	BLACKFOOT	ID		83221
MEMBER	DIANA RISA	306 W 175 N	BLACKFOOT	ID		83221
5. Organized Under the Laws of: ID W 62509	6. Annual Report must be signed.* Signature: Brian Risa Name (type or print): Brian Risa		Date: 03/23/2016 Title: member			
Processed 03/23/2016		* Electronically provided signatures are accepted as original signatures.				