

No. W 83193	Due no later than Apr 30, 2018 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. SIMMONS SURGICAL LLC. DANE SIMMONS JR. 123 N. MAIN STREET POCATELLO ID 83204		DANE SIMMONS 123 N MAIN ST POCATELLO ID 83204			
			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	DANE H. SIMMONS	123 N. MAIN STREET	POCATELLO	ID	USA	83204
5. Organized Under the Laws of: ID W 83193	6. Annual Report must be signed.* Signature: Dane Simmons Jr. Name (type or print): Dane Simmons Jr.		Date: 06/01/2018 Title: Owner			
Processed 06/01/2018		* Electronically provided signatures are accepted as original signatures.				