

No. W 75804		Due no later than Jul 31, 2012 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		1. Mailing Address: Correct in this box if needed. IDAHO FALLS EMERGENCY NEUROLOGICAL SERVICES, PLLC BRENT L GREENWALD 3155 CHANNING WY STE B IDAHO FALLS ID 83404 USA		ROBERT L CACH 2375 E SUNNYSIDE RD STE G IDAHO FALLS ID 83404			
NO FILING FEE IF RECEIVED BY DUE DATE				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	ROBERT L CACH	2375 E SUNNYSIDE RD	IDAHO FALLS	ID	USA	83404	
MEMBER	BRENT GREENWALD	3200 CHANNING WY	IDAHO FALLS	ID	USA	83404	
MEMBER	STEPHEN MARANO	3480 WASHINGTON PKWY	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of: ID W 75804		6. Annual Report must be signed.* Signature: Brent H. Greenwald Name (type or print): Brent H. Greenwald					
		Date: 05/15/2012 Title: Member					
Processed 05/15/2012 * Electronically provided signatures are accepted as original signatures.							