

No. W 99933		Due no later than Jan 31, 2013 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. WIGGIN MEDICAL BILLING SERVICES LLC Suzanne Wiggin 6206 EDGEWATER DR BOISE ID 83709		Suzanne Wiggin 6206 EDGEWATER DR BOISE ID 83709-1031			
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 MANAGER	Name BILLY L WIGGIN	Street or PO Address 6206 EDGEWATER DR		City BOISE	State ID	Country USA	Postal Code 83709-1031
5. Organized Under the Laws of: ID W 99933		6. Annual Report must be signed.* Signature: Suzanne Wiggin Name (type or print): Suzanne Wiggin Date: 01/03/2013 Title: Owner					
Processed 01/03/2013 * Electronically provided signatures are accepted as original signatures.							