

No. W 96863		Due no later than Oct 31, 2015		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. SPECIALTY LABS, PLLC TAMARA SIMON 951 E PLAZA DRIVE STE 140 EAGLE ID 83616 USA		TAMARA SIMON 951 E PLAZA DRIVE STE 170 EAGLE ID 83616			
				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	TAMARA M SIMON	951 E PLAZA DR STE 170	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 96863		Signature: Angela Lenz				Date: 09/28/2015	
		Name (type or print): Angela Lenz				Title: Bookkeeper	
Processed 09/28/2015		* Electronically provided signatures are accepted as original signatures.					