

No. C 186350		Due no later than Feb 28, 2013		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. BOISE CAT CLINIC, P.C. ROBIN ROLLER 506 N. LATAH ST. BOISE ID 83706 USA		ROBIN ROLLER 3293 W SCENIC DR BOISE ID 83703			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	ROBIN ROLLER	3293 W. SCENIC DR.	BOISE	ID	USA	83703-4718	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID C 186350		Signature: Robin Roller				Date: 02/25/2013	
		Name (type or print): Robin Roller				Title: President	
Processed 02/25/2013		* Electronically provided signatures are accepted as original signatures.					