

No. W 82176	Due no later than Mar 31, 2015 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.		KARLIE A SHAH 11358 W. HAZELWOOD DR BOISE 83709			
	EDOC LLC KARLIE A SHAH 1116 S. VISTA AVE #215 BOISE ID 83705 USA		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
MANAGER	KARLIE A SHAH	11358 W. HAZELWOOD DR	BOISE	ID	USA	83709
MEMBER	GAURAV R SHAH	1022 PIKES PEAK ST	CALDWELL	ID	USA	83605
5. Organized Under the Laws of: ID W 82176	6. Annual Report must be signed.* Signature: Karlie Shah Name (type or print): Karlie Shah Date: 02/23/2015 Title: Manager					
Processed 02/23/2015		* Electronically provided signatures are accepted as original signatures.				