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| No. W 22231 | | Due no later than Jan 31, 2007 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. TARGHEE INTERNAL MEDICINE, PLLC ALLAN JEFFERY 108 WEST 1ST SOUTH REXBURG ID 83440 | | ALLAN JEFFERY 108 WEST 1ST SOUTH REXBURG ID 83440 | | | |
| 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 MEMBER | Name ALLAN JEFFERY | Street or PO Address PO BOX 519 | | City REXBURG | State ID | Country | Postal Code 83440 |
| 5. Organized Under the Laws of: IDAHO W 22231 | | 6. Annual Report must be signed.* Signature: ALLAN JEFFERY Name (type or print): ALLAN JEFFERY Date: 01/15/2007 Title: MEMBER | | | | | |
| Processed 01/15/2007 * Electronically provided signatures are accepted as original signatures. | | | | | | | |