No. C 156298		Due i	2. Registered A	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		STEPHANIE	STEPHANIE ANN KENNEDY 7638 SO. MCLINTOCK PLACE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.		AND THE PROPERTY OF THE PROPER				
		PROVENCIA DIGESTIVE HEALTH OF IDAHO, INC. STEPHANIE ANN KENNEDY 2540 E FRANKLIN RD MERIDIAN ID 83642		MERIDIAN ID 83642 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE					-			
		ess Addresses of Pre	esident, Secretary, and Directors. Treasure	er (optional).				
	Name		Street or PO Address	City	State	Country	Postal Code	
VICE PRESIDENT ERIC C KEN		NEDY	8747 W. BEN CT	BOISE	ID	USA	83714	
SECRETARY JASON A KE			1933 E. GOLDEN	CHANDLER	ΑZ	USA	85225	
PRESIDENT S	STEPHANIE /	A KENNEDY	7638 SO. MCLINTOCK PLACE	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Stephanie Kennedy		Date: 09/29/2015				
C 156298		Name (type or print): Stephanie Kennedy		Title: President/Owner				
Processed 09/29/2015	* Electronically provided signatures are accepted as original signatures.							