Jul. 23. 2013 8:10AM Adventist Health Breast Care Ctr No. 0085 P. 2

на С 127068	Reinstatement Annual Report Form ADMIN DISSOLVED 04/09/2012 1. Mailing Address: Correct in this box if needed. REDHAWK RADIOLOGY, P.A. GARALD E PRICES- JOHN Dedic 2050 OVERLAND AVE 781 Forthur Ridge BURLEY ID 03310 USA Handleson, NV 89052			2. Registered Agent and Office (NOT A P.O. BOX) ROBERT CHONTGOMERY CHTD 2160 ASTMIN RAPID WAY BOISE 10 83709 RECORD SEARCH AMERICA 1201 N LIBERTY #917 BOISE TO 83704 3. New Registered Agent Signature.	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00					
Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Office Held Name Street or PO Address City State Country Postal Code					
President.	John Delle	781 Feather Midge	(tradersa	n NV clark 8905	2
Secvetury 1	Loni Dedic	781 Eculpan Aidge	Heuderso	in, NV Clark 8905	2.
5. Organized Under the La	rws of: 6. Signature:		Todi:	Oate:	
C 127068	Name (hin	e or print):		7-23-20	13
	,		dic	Presiden	<u> </u>
LOSUEZ 07/19/2013 by KAH					

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Black 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of president, secretary, and directors. Note: <u>DO NOT</u> put "same as last year" or "same as above". These will not be accepted, Changes here will not affect the address in Block 1. If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the corporation. Print or type the name of the signer below the signature.

** The image of this form will be available on the internet once it has been filled. DO NOT enter Social Security numbers.

If the corporation is no longer doing business in Ideho, you may file the appropriate form. Forms are available on the website at www.sos.klaho.gov, However, if no timely annual report is filed, administrative action will be taken, at no cost to the corporation to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.