No. J 1047 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Sep 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. MRI ASSOCIATES LLP DAVID GILES, MD 949 N CURTIS RD BOISE ID 83706			Registered Agent and Address (NO PO BOX) TOM HENSON			
				949 N CURTIS RD BOISE ID 83706 3. New Registered Agent Signature:*				
								4. Limited Liability Part
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PARTNER	DOCTORS M INC	1AGNETIC RESONANCE	949 N CURTIS RD	BOISE	ID	USA	83706	
PARTNER	WEST VALLE	Y MEDICAL CENTER	1717 ARLINGTON	CALDWELL	ID	USA	83605	
5. Organized Under the Laws of: 6. A		6. Annual Report must	be signed.*					
ID		Signature: David Giles, Md			Date: 07/25/2013			
J 1047		Name (type or print): David Giles, Md			Title: Ceo			
Processed 07/25/2013		* Electronically provided	I signatures are accepted as origina	l signatures.				