No. C 100558		Due no later than Dec 31, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to:				RICHARD D. ALLEN D.V.M.				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this by JEROME VETERINARY HOSPITAL, P.A. MARY M ALLEN 32 E 400 N JEROME ID 83338		32 E 400 N JEROME ID 83338 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter N	ames and Busin	ess Addresses of President, Secretary, and D	irectors. Treasurer (optional).				
Office Held	Name	Street or PO Addr	ess	City	State	Country	Postal Code	
SECRETARY	MARY M AL	LEN 32 E 400 N		JEROME	ID	USA	83338	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Mary M Allen	Date: 10/15/2015					
C 100558		Name (type or print): Mary M Allen		Title: Secretary				
Processed 10/15/2015	rocessed 10/15/2015 * Electronically provided signatures are accepted as original signatures.							