

No. W 146771	Due no later than Jan 31, 2017 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. BARBARA ZIMMER CRNA LLC BARBARA ZIMMER PO BOX 375 VICTOR ID 83455	BARBARA ZIMMER 1000 W 8174 S VICTOR ID 83455				
		3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	JOHN CARR	1000 WEST 8174 SOUTH	VICTOR	ID	USA	83455
5. Organized Under the Laws of: ID W 146771	6. Annual Report must be signed.* Signature: barbara zimmer Name (type or print): barbara zimmer Date: 01/01/2017 Title: crna					
Processed 01/01/2017		* Electronically provided signatures are accepted as original signatures.				