

No. <b>W 179379</b>		<b>Due no later than Mar 31, 2018</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  WOODWARD MEDICAL MANAGEMENT, LLC 4200 S HIGHCLIFF AVE MERIDIAN ID 83642		CATHY WOODWARD 4200 S HIGHCLIFF AVE MERIDIAN ID 83642			
				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	CATHY WOODWARD	4200 S HIGHCLIFF AVE	MERIDIAN	ID	USA	83642-3103	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 179379</b>		Signature: Cathy Woodward				Date: 01/24/2018	
		Name (type or print): Cathy Woodward				Title: Member	
Processed 01/24/2018		* Electronically provided signatures are accepted as original signatures.					