

No. <b>W 114903</b>		<b>Due no later than Jun 30, 2017</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> MACHLIS-PIERCE ANESTHESIA LLC GIL W PIERCE 7074 BAUDELAIRE DRIVE COEUR D ALENE ID 83815		SARAH KATHERINE PIERCE 7074 BAUDELAIRE DRIVE COEUR D ALENE ID 83815			
				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	GIL W PIERCE	7074 BAUDELAIRE DRIVE	COEURD'ALENE	ID	USA	83815	
MEMBER	SARAH K PIERCE	7074 BAUDELAIRE DRIVE	COEUR D'ALENE	ID	USA	83815	
5. Organized Under the Laws of: <b>ID W 114903</b>		6. Annual Report must be signed.* Signature: Gil Pierce Name (type or print): Gil Pierce					
		Date: 06/30/2017 Title: Member					
Processed 06/30/2017		* Electronically provided signatures are accepted as original signatures.					