

No. W 116676		Due no later than Aug 31, 2014 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		1. Mailing Address: Correct in this box if needed. MEDICAL CABINETS AND FIXTURE COMPANY, LLC JARED MURDOCK 572 W 200 N BLACKFOOT ID 83221		JARED MURDOCK 572 W 200 N BLACKFOOT ID 83221-5406			
NO FILING FEE IF RECEIVED BY DUE DATE				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	JARED MURDOCK	572 W 200 N	BLACKFOOT	ID	USA	83221	
MEMBER	NEIL MURDOCK	568 WEST 200 NORTH	BLACKFOOT	ID	USA	83221	
5. Organized Under the Laws of: ID W 116676		6. Annual Report must be signed.* Signature: Jared Murdock Name (type or print): Jared Murdock Date: 06/26/2014 Title: Member					
Processed 06/26/2014 * Electronically provided signatures are accepted as original signatures.							