

No. W 90201		Due no later than Jan 31, 2016		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. MIERS JOHNSON ORTHOPAEDICS PLLC MIERS C JOHNSON III 14500 W LEWIS LN NAMPA ID 83686		MIERS C JOHNSON III 14500 W LEWIS LN NAMPA ID 83686			
				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	MIERS C JOHNSON III	14500 LEWIS LN	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 90201		Signature: Miers C Johnson III				Date: 12/03/2015	
		Name (type or print): Miers C Johnson III				Title: member	
Processed 12/03/2015		* Electronically provided signatures are accepted as original signatures.					