No. <b>W 34117</b>		Due no later than Oct 31, 2011		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  SALMON ORTHOPEDICS, P.L.L.C. DAVID YANOFF 343 DIAMOND CREEK LN SALMON ID 83467			DAVID YANOFF 343 DIAMOND CREEK LN SALMON ID 83467  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	panies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER DAVID YANO		DFF	343 DIAMOND CREEK LN	,	SALMON	ID	USA	83467
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: David Yanoff			Date: 08/09/2011			
W 34117		Name (type or print): David Yanoff			Title: Member			
Processed 08/09/2011 * Electronically provided signatures are accepted as original signatures.								