

No. W 70515		Due no later than Jan 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. ACHIEVE PHYSICAL THERAPY PLLC REID PATTERSON 4776 N FIVE MILE RD STE 101 BOISE ID 83713		REID PATTERSON 4776 N FIVE MILE RD STE 101 BOISE ID 83713			
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 MEMBER	Name REID PATTERSON	Street or PO Address 2536 PRONGHORN LN		City EAGLE	State ID	Country USA	Postal Code 83616
5. Organized Under the Laws of: ID W 70515		6. Annual Report must be signed.* Signature: Reid Patterson Name (type or print): Reid Patterson Date: 01/24/2014 Title: Owner					
Processed 01/24/2014 * Electronically provided signatures are accepted as original signatures.							