

No. W 107263		Due no later than Oct 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. MEDSTONE REVENUE MANAGEMENT LLC BRANDI GLEASON 5449 S 1600 W PRESTON ID 83263 USA		BRANDI GLEASON 5449 S 1600 W PRESTON 83263			
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 MANAGER	Name BRANDI GLEASON	Street or PO Address 5449 S 1600 W		City PRESTON	State ID	Country USA	Postal Code 83263
5. Organized Under the Laws of: ID W 107263		6. Annual Report must be signed.* Signature: Brandi Gleason Name (type or print): Brandi Gleason Date: 10/07/2014 Title: Manager					
Processed 10/07/2014 * Electronically provided signatures are accepted as original signatures.							