

No. W 3719		Due no later than Mar 31, 2017 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. TERRAZAS, PLLC ROSA M TERRAZAS 2401 E. HERBERT DR. BOISE ID 83706		ROSA M TERRAZAS M.D. 2401 E. HERBERT DR. BOISE ID 83706		
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 ROSA M TERRAZAS M.D.	Street or PO Address 2401 E. HERBERT DR.	City BOISE	State ID	Country	Postal Code 83706
5. Organized Under the Laws of: ID W 3719		6. Annual Report must be signed.* Signature: Rosa M. Terrazas Name (type or print): Rosa M. Terrazas Date: 01/25/2017 Title: MEMBER				
Processed 01/25/2017 * Electronically provided signatures are accepted as original signatures.						