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|---|-------------------------|---|--|---|-------------|----------------|----------------------|
| No. W 83675 | | Due no later than May 31, 2016 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. TETON RADIOLOGY MADISON LLC MICHAEL P HODEL 2265 E SUNNYSIDE RD. IDAHO FALLS ID 83440 | | RACHEL GONZALES 450 E MAIN ST REXBURG ID 83440-8340 | | | |
| 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 MICHAEL P HODEL | Street or PO Address 2265 E SUNNYSIDE RD. | | City IDAHO FALLS | State ID | Country USA | Postal Code 83404 |
| 5. Organized Under the Laws of: ID W 83675 | | 6. Annual Report must be signed.* Signature: MICHAEL HODEL Name (type or print): MICHAEL HODEL Date: 03/21/2016 Title: MANAGER | | | | | |
| Processed 03/21/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | |