

No. <b>C 140103</b>		<b>Due no later than Jul 31, 2017</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> SARAH BOLENDER, M.D., P.A. SARAH BOLENDER 2798 N CLIFFVIEW PL BOISE ID 83702-6521		SARAH BOLENDER MD 2798 N CLIFFVIEW PL BOISE ID 83702			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	SARAH L BOLENDER, M.D.	2798 N CLIFFVIEW PL	BOISE	ID	USA	83702	
5. Organized Under the Laws of:  <b>ID C 140103</b>		6. Annual Report must be signed.* Signature: Sarah L. Bolender, MD Name (type or print): Sarah L. Bolender, MD Date: 05/29/2017 Title: MD, President					
Processed 05/29/2017		* Electronically provided signatures are accepted as original signatures.					