

No. W 115812		Due no later than Jul 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. SNAKE RIVER PODIATRY PLLC DON J GILBERT DPM 3690 RIDGEWOOD RD POCATELLO ID 83201-7704		DON J GILBERT DPM 3690 RIDGEWOOD RD POCATELLO ID 83201-7704			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	KAYDENE H GILBERT	3690 RIDGEWOOD RD	POCATELLO	ID	USA	83201-7704	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 115812		Signature: Don J Gilbert DPM				Date: 05/26/2017	
		Name (type or print): Don J Gilbert DPM				Title: Owner	
Processed 05/26/2017		* Electronically provided signatures are accepted as original signatures.					