

No. W 34455		Due no later than Nov 30, 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. WOOD RIVER FAMILY MEDICINE, PLLC RICHARD F PARIS 113 BLACKFEET DRIVE HAILEY ID 83333-8521		RICHARD F PARIS MD 113 BLACKFEET DRIVE HAILEY ID 83333-8521			
				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	RICHARD PARIS	113 BLACKFEET DRIVE	HAILEY	ID	USA	83333-8521	
MEMBER	KATHRYN A WOODS	113 BLACKFEET DRIVE	HAILEY	ID	USA	83333-8521	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 34455		Signature: richard F Paris				Date: 09/22/2017	
		Name (type or print): richard F Paris				Title: member	
Processed 09/22/2017		* Electronically provided signatures are accepted as original signatures.					