| No. W 144182 | | Due no later than Nov 30, 2015 | | 2. Registered Ag | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|--|--|--|---|---------|-------------|--|
| Return to: | | Annual Report Form | | | JEREMY TAHI BROWN | | | |
| SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | 1. Mailing Address: Correct in this box if needed. TAHI PHYSICAL THERAPY PLLC JEREMY TAHI BROWN 3345 MERLIN DRIVE SUITE 100 | | 3345 MERLIN DRIVE SUITE 100 IDAHO FALLS ID 83404-8340 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | IDAHO FALLS ID 83404 mes and Addresses of at least one Member or Manager. | | | | | | |
| Office Held | Name | arries aria Addresses | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | | AHI BROWN | 3345 MERLIN DRIVE SUITE 100 | IDAHO FALLS | ID | USA | 83404 | |
| 5. Organized Under the Laws of: | | 6. Annual Report | | | | | | |
| ID W 144182 | | Signature: Jeremy Brown | | Date: 09/17/2015 | | | | |
| | | Name (type or print): Jeremy Brown | | Title: Owner | | | | |
| Processed 09/17/2015 | | * Electronically pro | ovided signatures are accepted as original s | ignatures. | | | | |