No. W 23497		Due no later than Apr 30, 2018		2. Regis	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. VERST SPINE & ORTHOPEDIC CARE, PLLC ELAINE JEX 15 W GALENA ST HAILEY ID 83333		d. 200 L	DAVID B VERST 200 LET'ER BUCK HAILEY ID 83333 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE			- 6-t-level and Marshau and Ma					
200		mes and Addresses	s of at least one Member or Manager.	C:L	Chata	C	Destal Carlo	
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	DAVID B VE	RST MD	PO BOX 3703	HAILEY	/ ID	USA	83333	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Elaine Jex		Da	Date: 03/14/2018			
W 23497		Name (type or print): Elaine Jex		Ti	Title: Financial Manager			
Processed 03/14/2018 * Electronically provided signatures are accepted as original signatures.								