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| No. W 88397 | | 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. CARDIAC PERSPECTIVES, LLC KAREN BOYD PO BOX 140095 GARDEN CITY ID 83714 | | JAMES MICHAEL BOYD 3450 PLANTATON RIVER DR BOISE ID 83703 | |
| | | | | 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 |
| MANAGER | KAREN BOYD | PO BOX 140095 | GARDEN CITY | ID | USA 83714 |
| 5. Organized Under the Laws of: ID W 88397 | | 6. Annual Report must be signed.* Signature: Karen Boyd Name (type or print): Karen Boyd Date: 09/20/2017 Title: Manager | | | |
| Processed 09/20/2017 | | * Electronically provided signatures are accepted as original signatures. | | | |