INSTRUCTIONS ON REVERSE SIDE

ISSUED: 07-04-1995

No. 101

Idaho Limited Liability Company Annual Report Form

Due No Later Than November 30, 1995

Return To:

Secretary of State
700 W Jefferson
P.O. Box 83720
Boise, ID 83720-0080

* FIRST NOTICE *
NO FEE REQUIRED

1. Mailing Address -- Please Correct If Not Correct

SURGICARE CENTER OF IDAHO, L.L.C.
W ANDREW LYLE, M.D.
755 E 3900 S

SALT LAKE CITY UT 84107

2. Registered Agent and Office NOT A P.O. BOX

C T CORPORATION SYSTEM
300 N 6TH ST

BOISE ID 83702

3. Organized Under The Laws of

ID
NO: 101

4. Names and Addresses of ☒ Managers or ☐ Members (check one) MUST BE PRINTED OR TYPED

Name	Street or P.O. Address	City	State	Zip
W. ANDREW LYLE, MD PC	755 E. 3900 S.	Salt Lake City	UT	84107

5. Signature of the Current Registered Agent (if changed in block 2)

6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.

Signature Sylvia J. Thomas Date 10-16-95

Name (Please Print) Sylvia J. Thomas, Asst. Controller