No. W 49822

Return to:
SECRETARY OF STATE
450 N 4th STREET
PO BOX 83720
BOISE, ID 83720-0080

REINSTATEMENT
FEE DUE: $30.00

Reinstatement Annual Report Form
ADMIN DISSOLVED 07/08/2010

1. Mailing Address: Correct in this box if needed.

NEPHRON CAPITAL LLC
Amit Sharma
~~3210 E CHINDEN BLVD STE 115~~
~~BOX 524~~
~~EAGLE ID 83616~~
1633 S Water Leaf
EAGLE, ID 83616

2. Registered Agent and Office (NOT A P.O. BOX)
AMIT SHARMA MD
~~3210 E CHINDEN BLVD STE 115~~
~~EAGLE ID 83616~~
1633 S Water Leaf Ave
EAGLE, ID 83616

3. New Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
Managing Partner	Amit Sharma	1633 S Water Leaf	EAGLE,	ID		83616

5. Organized Under the Laws of:
IDAHO
W 49822

6.
Signature: [signature] Date: 11AUG2010
Name (type or print): Amit Sharma Title: Managing Partner

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