No. W 154161		Due no later than Jul 31, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JASON M POSTON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JASON M. POSTON, MD, PLLC JASON M POSTON 3400 MERLIN DR			3400 MERLIN DR IDAHO FALLS ID 83404			
NO FILING FEE IF RECEIVED BY DUE DATE		IDAHO FALLS	ID 83404		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Compar	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER DIANNA POS		STON	3400 MERLIN DRIVE		IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jason M Poston			Date: 05/31/2016			
W 154161		Name (type or print): Jason M Poston			Title: President			
Processed 05/31/2016 * Electronically provided signatures are accepted as original signatures.								