

No. <b>C 199440</b>		<b>Due no later than Aug 31, 2017</b>		<b>2. Registered Agent and Address (NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  CHRIS SCHOLES, P.C. CHRIS SCHOLES PC 526 SHOUP AVE W A TWIN FALLS ID 83301 USA		CHRIS SCHOLES MD 526 SHOUP AVE W A TWIN FALLS ID 83301			
				3. <u>New</u> Registered Agent Signature: *			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	ANNA SCHOLES	526 SHOUP AVE W A	TWIN FALLS	ID	USA	83301	
PRESIDENT	CHRIS SCHOLES MD	526 SHOUP AVE W A	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  <b>ID C 199440</b>		6. Annual Report must be signed.* Signature: Scholes Dermatology LLC Name (type or print): Scholes Dermatology LLC  Date: 08/08/2017 Title: Accountant					
Processed 08/08/2017		* Electronically provided signatures are accepted as original signatures.					