

No. W 38423		Due no later than Apr 30, 2011		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. ALLIANCE MEDICAL GROUP, LLC KIRK MOORE 10482 W CARLTON BAY DR. GARDEN CITY ID 83714-5143 USA		PAUL M BOYD 101 S CAPITOL BLVD STE 1900 BOISE ID 83702			
				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	
MEMBER	ALLIANCE PROVID ALLIANCE PROVIDERS LLC	10482 W CARLTON BAY DR.	GARDEN CITY	ID	USA	83714-5143	
MEMBER	ST. LUKES REGIN ST. LUKES REGIONAL MEDICAL CEN	10482 W CARLTON BAY DR.	GARDEN CITY	ID	USA	83714-5143	
5. Organized Under the Laws of: ID W 38423		6. Annual Report must be signed.* Signature: Kirk Moore Name (type or print): Kirk Moore Date: 02/09/2011 Title: Director of Accounting					
Processed 02/09/2011		* Electronically provided signatures are accepted as original signatures.					