

No. <b>W 31747</b>	<b>Due no later than Jul 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(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>1. Mailing Address: Correct in this box if needed.</b> ADVANCED FAMILY MEDICINE, PLLC MICHAEL W FOUTZ 943 N LINDER ROAD 103 KUNA ID 83634		S&S LEGAL DOCUMENTS, LLC N/A MERIDIAN ID 83642			
			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
MANAGER	MICHAEL W FOUTZ	943 N LINDER ROAD 103	KUNA	ID		83634
MEMBER	KATHERINE M ELSTUN	943 N LINDER ROAD 103	KUNA	ID		83634
MEMBER	MOLLY B ARMIJO	943 N LINDER ROAD 103	KUNA	ID		83634
5. Organized Under the Laws of:  <b>ID W 31747</b>	6. Annual Report must be signed.* Signature: Michael W Foutz Name (type or print): Michael W Foutz		Date: 06/01/2016 Title: Manager			
Processed 06/01/2016		* Electronically provided signatures are accepted as original signatures.				