No. W 43283		Due no later than Sep 30, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. BROOK MEDICAL PLLC VICKI L WOOLL MD 1281 E IRON EAGLE DR EAGLE ID 83616-6599		1281 E IRO EAGLE ID	VICKI L WOOLL MD 1281 E IRON EAGLE DR EAGLE ID 83616-6599 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Address	es of at least one Member or Manager					
Office Held	Name	nes ana maaress	Street or PO Address	City	State	Country	Postal Code	
MEMBER VICKI L WOOLL		OCLL MD	1281 E IRON EAGLE DR	EAGLE	ID	USA	83616-6599	
5. Organized Under the Laws of: ID W 43283		Signature: Vi	rt must be signed.* icki Wooll or print): Vicki Wooll		Date: 08/02/2018 Title: Member			
Processed 08/02/2018 * Electronically provided signatures are accepted as original signatures.								