

FILED EFFECTIVE

No. W 70513	Reinstatement Annual Report Form ADMIN DISSOLVED 04/06/2010		2. Registered Agent and Office (NOT A P.O. BOX) HOWARD A KING 600 N ROBBINS RD STE 401 BOISE ID 83702																																										
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. INTERMOUNTAIN ORTHOPAEDIC, PLLC HOWARD A KING 600 N ROBBINS RD STE 401 BOISE ID 83702		<i>Paulette M Carlson</i> 3. New Registered Agent Signature. <i>Paulette M Carlson</i> 600 N. Robbins Road Ste 401 Boise ID 83702-9566																																										
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Medical Director</td> <td>H. King, MD</td> <td>600 N Robbins Rd., Ste 401</td> <td>Boise,</td> <td>ID</td> <td></td> <td>83702-4566</td> </tr> <tr> <td>Financial Director</td> <td>S. Roser, MD</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Board of Managers:</td> <td>M. Curtin, MD</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>E. Heggland, MD</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>J. Loveless, MD</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>all of above at the same address 600 N. Robbins Road, Ste 401, Boise, ID 83702-4566</p>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	Medical Director	H. King, MD	600 N Robbins Rd., Ste 401	Boise,	ID		83702-4566	Financial Director	S. Roser, MD						Board of Managers:	M. Curtin, MD							E. Heggland, MD							J. Loveless, MD					
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5. Organized Under the Laws of: IDAHO W 70513	6. Signature: <i>Patrick Creager</i> Date: <i>4/23/10</i> Name (type or print): <i>Patrick Creager</i> Title: <i>CEO</i>																																												
Issued 04/23/2010 by CLH																																													

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Pay special attention to the mailing address. If the correct address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box.

Block 3: Only a new registered agent must sign in Block 3.

Block 4: Enter names and business addresses of management. **Note:** Do not put "same as last year" or "same as above". These will not be accepted.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.