

No. W 80063	Due no later than Dec 31, 2017 Annual Report Form		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. GEORGE H. STEPHENS, M.D., PLLC GEORGE H STEPHENS, MD 2059 PINTO AVE. POCATELLO ID 83201-2017		DAVE R GALLAFENT 109 N ARTHUR POCATELLO ID 83204			
			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	GEORGE H STEPHENS, MD	2059 PINTO AVE.	POCATELLO	ID	USA	83201-2017
5. Organized Under the Laws of: ID W 80063	6. Annual Report must be signed.* Signature: George H. Stephens Name (type or print): George H. Stephens		Date: 11/01/2017 Title: Manager			
Processed 11/01/2017		* Electronically provided signatures are accepted as original signatures.				