

No. W 75804		Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2010		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT L CACH 2375 E SUNNYSIDE RD STE G IDAHO FALLS ID 83404	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. IDAHO FALLS EMERGENCY NEUROLOGICAL SERVICES, PLLC ROBERT L CACH <i>Brent Greenwald</i> 2375 E SUNNYSIDE RD, STE G IDAHO FALLS ID 83404 USA <i>3155 Channing Way Ste B</i>		3. New Registered Agent Signature.	
REINSTATEMENT FEE DUE: \$30.00					
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.					
Manager/Member Name		Street or PO Address		City	State Country Postal Code
<i>Mbr.</i> Brent H. Greenwald		<i>3155 Channing Way Suite B</i>		<i>Idaho Falls</i>	<i>ID USA 83404</i>
Robert L. Cach		<i>2375 E Sunnyside Rd Ste G</i>		<i>Idaho Falls</i>	<i>ID USA 83404</i>
Clark Allen		<i>2375 E Sunnyside Rd Ste F</i>		<i>Idaho Falls</i>	<i>ID USA 83404</i>
Stephen R. Marano		<i>1975 Martha Ave Ste A</i>		<i>Idaho Falls</i>	<i>ID USA 83404</i>
5. Organized Under the Laws of: IDAHO W 75804		6. Signature: <i>[Signature]</i>		Date: <i>11/1/10</i>	
		Name (type or print): Brent H. Greenwald		Title: Member	
Issued 10/29/2010 by KAH					