

No. W 26431		Due no later than Oct 31, 2016		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. CHER JACOBSEN, M.D., PLLC 185 W 4TH AVE STE B POST FALLS ID 83854		CHER JACOBSEN, M.D. 185 W 4TH AVE STE B POST FALLS ID 83854	
				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
MEMBER	CHER JACOBSEN, M.D.	185 W. 4TH AVE STE B	POST FALLS	ID	83854
5. Organized Under the Laws of: ID W 26431		6. Annual Report must be signed.* Signature: Cher Jfacobsen Name (type or print): Cher Jfacobsen Date: 08/30/2016 Title: registered agent			
Processed 08/30/2016		* Electronically provided signatures are accepted as original signatures.			