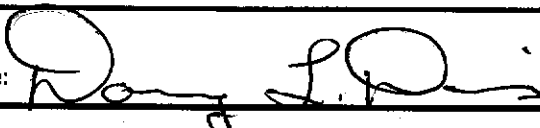


No. <b>W 67054</b>	<b>Reinstatement Annual Report Form</b> <b>ADMIN DISSOLVED 12/07/2010</b>		2. Registered Agent and Office ( <b>NOT A P.O. BOX</b> ) DANNY L DAVIS 2001 S WOODRUFF AVE #20 IDAHO FALLS ID 83404
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080  <b>REINSTATEMENT</b> <b>FEE DUE: \$30.00</b>	1. Mailing Address: Correct in this box if needed.  TETON NUCLEAR MEDICINE SERVICE LLC DANNY L DAVIS 2001 S WOODRUFF AVE #20 IDAHO FALLS ID 83404		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members.					
Manager/Member	Name	Street or PO Address	City	State	Country Postal Code
manager	Danny L. Davis	2001 S. Woodruff Suite #20	Idaho Falls	ID	USA 83404

5. Organized Under the Laws of:  <div style="text-align: center; padding: 10px;"> <b>IDAHO</b>  <b>W 67054</b> </div>	6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 70%;">           Signature:   <hr/>           Name (type or print): <u>Danny L. Davis</u> </div> <div style="width: 25%;">           Date: <u>12/22/10</u>             Title: <u>manager</u> </div> </div>
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Issued 12/20/2010 by SLD

## 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.**