No. W 165165		Due no later than Apr 30, 2018		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JARED W ALLEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BLACKFOOT PHYSICIANS & SURGEONS PLLC 2105 CORONADO ST IDAHO FALLS ID 83404		IDAHO FALL	2105 CORONADO ST IDAHO FALLS ID 83404 3. New Registered Agent Signature:*			
NO FILING RECEIVED BY	DUE DATE	mas and Addresses	of at least one Member or Manager.					
Office Held	Name	mes and Addresses	Street or PO Address	City	State	Country	Postal Code	
MEMBER	KIRT M MC	KINLAY, MD	1441 PARKWAY DR	BLACKFOOT	ID	USA	83221	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 165165		Signature: Jared W. Allen		Date	Date: 04/30/2018			
		Name (type or print): Jared W. Allen		Title	Title: Registered Agent			
Processed 04/30/2018	3	* Electronically pro	vided signatures are accepted as origin	al signatures.				