

|   |                 |   |         |   |         |             |  |
|---|-----------------|---|---------|---|---------|-------------|--|
| No. <b>W 82207</b>  |                 | <b>Due no later than Mar 31, 2015</b><br><b>Annual Report Form</b>  |         | 2. Registered Agent and Address ( <b>NO PO BOX</b> )      |         |             |  |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080  |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MMH IMAGING CENTER, LLC<br>TROY CHRISTENSEN<br>450 E MAIN ST<br>REXBURG ID 83440-0310<br>USA |         | RACHEL GONZALES<br>450 E MAIN ST<br>REXBURG ID 83440-0310 |         |             |  |
| <b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b>  |                 |   |         | 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  | GREGORY D HEXEM | 450 E MAIN ST   | REXBURG | ID  | USA     | 83440-0310  |  |
| MEMBER  | CECIL K RICKS   | 450 EAST MAIN STREET  | REXBURG | ID  | USA     | 83440       |  |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 82207</b>                                  |                 | 6. Annual Report must be signed.*<br><br>Signature: Shawn Bennett<br>Name (type or print): Shawn Bennett  |         |   |         |             |  |
|   |                 | Date: 04/21/2015<br>Title: Accountant   |         |   |         |             |  |
| Processed 04/21/2015      * Electronically provided signatures are accepted as original signatures. |                 |   |         |   |         |             |  |