

No. <b>W 123687</b>		<b>Due no later than Mar 31, 2015</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> KOVAC FOOT SURGERY CENTER, PLLC KYLIN KOVAC 1540 ELK CREEK IDAHO FALLS ID 83404		ERIC L OLSEN 201 E CENTER ST POCATELLO 83201			
				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	KYLIN KOVAC	1540 ELK CREEK DRIVE	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 123687</b>		Signature: ERIC L. OLSEN				Date: 02/27/2015	
		Name (type or print): ERIC L. OLSEN				Title: REGISTERED AGENT	
Processed 02/27/2015		* Electronically provided signatures are accepted as original signatures.					