

No. W 157527		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		Annual Report Form		LYN LANGFORD DVM 875 ROSEWOOD DR TWIN FALLS ID 83301			
		1. Mailing Address: Correct in this box if needed. VALLEY PET VACCINATIONS, PLLC LYN LANGFORD DVM 875 ROSEWOOD DR TWIN FALLS ID 83301		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	
MANAGER	LYN W LANGFORD	875 ROSEWOOD DR.	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 157527		6. Annual Report must be signed.* Signature: Lyn Langford DVM Name (type or print): Lyn Langford DVM Date: 09/02/2016 Title: Manager					
Processed 09/02/2016		* Electronically provided signatures are accepted as original signatures.					