No. W 55249	Due no later than October 31, 2008	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Compan	Annual Report Form 1. Mailing Address - Correct in this box. if applicable SHIFA BLACKFOOT LLC FARABAT MANNAN PO BOX 986 BLACKFOOT, ID 83221 ies: Enter Names and Addresses of Members. Street or P.O. Address City	FAHIM RAHIM 444 HOSPITAL WAY STE 607 POCATELLO, ID 83201 3. New Registered Agent Signature State Zip
<u>office held</u> Name MEMBER FAHIM RA	STE 607 WAY POCK	ELLO IO 83201
5. Organized Under the Laws of: IDAHO W 55249	Signature Name (Typedor F-441144 IA) Name Privaci)	Date
Issued 08/06/2008	Do Not Tape or Staple	200810006456