

No. W 61762		Due no later than Apr 30, 2011		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		1. Mailing Address: Correct in this box if needed. JENSEN ANESTHESIA, P.L.L.C. BLAKE JENSEN DO 1744 WILDFLOWER LANE TWIN FALLS ID 83301		BLAKE JENSEN DO 1744 WILDFLOWER LANE 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	
MEMBER	BLAKE JENSEN DO	1744 WILDFLOWER LANE	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 61762		Signature: Blake Jensen				Date: 02/28/2011	
		Name (type or print): Blake Jensen				Title: Member	
Processed 02/28/2011		* Electronically provided signatures are accepted as original signatures.					