No. C 122283		D	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		N 200 000 000 000 000 000 000 000 000	GARY P WALKER 1067 EASTLAND DR. TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. GARY P. WALKER, O.D., P.C. GARY P WALKER 1067 EASTLAND DR. TWIN FALLS ID 83301		According to the second second				
NO FILING FEE IF		I WINTALLS ID 05501		3. <u>New</u> Registers	sa rigerie s	ignatare.		
RECEIVED BY DUE DATE								
4. Corporations: Enter Nam	es and Busin	ess Addresses of	President, Secretary, and Directors. Treasu	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY CARA WALK		ER	1067 EASTLAND DR.	TWIN FALLS	ID	USA	83301	
PRESIDENT JARED P WA			1067 EASTLAND DR.	TWIN FALLS	ID	USA	83301	
VICE PRESIDENT	RESIDENT RUSTIN M		1067 EASTLAND DRIVE	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ъ		Signature: Jared P. Walker			Date: 01/08/2018			
C 122283		Name (type or print): Jared P. Walker			Title: President			
Processed 01/08/2018	* Electronically provided signatures are accepted as original signatures.							