No. C 137104		Due no later than Jan 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form ALAN OLMSTEAD						
		1. Mailing Address: Correct in this box if needed. ALAN OLMSTEAD M.D. CHTD BECKY PICKLESIMER 844 WASHINGTON ST NORTH SUITE 100 TWIN FALLS ID 83301 USA		SUITE 100 TWIN FALL	844 WASHINGTON ST NORTH SUITE 100 TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).								
Office Held Na	me		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT ALAN OLMSTEAD		TEAD	844 WASHINGTON ST NORTH SUI 100	TE TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 137104		Signature: BECKY PICKLESIMER Date: 12/29/2017						
		Name (type or prir		Title: OFFICE MANAGER				
Processed 12/29/2017 * Electronically provided signatures are accepted as original signatures.								