No. W 137926		Due no later than May 31, 2017 Annual Report Form		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:					CHRIS MALCOM			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MALCOM RADIOLOGY PLLC CHRISTOPHER MALCOM DO 9257 FOOTHILL RD MIDDLETON ID 83644		MIDDLETON	9257 FOOTHILL RD MIDDLETON ID 83644 3. New Registered Agent Signature:*			
RECEIVED B	NG FEE IF Y DUE DATE							
2000 000 100	Companies: Enter Na	mes and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	CHRIS J MA	ALCOM	9257 FOOTHILL RD	MIDDLETON	ID	USA	83644	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 137926		Signature: Chris Malcom			Date: 06/16/2017			
		Name (type or print): Chris Malcom			Title: manager			
Processed 06/16/20	17	* Electronically	provided signatures are accepted as original	signatures.				