No. W 133486		Due no later than Jan 31, 2015			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 1. Mailing Address: Correct in this box if needed. OWENS MEDICAL PLLC KEVIN OWENS 21 GRANADA PL BURLEY ID 83318			BETTY THIEMAN 253 ADAMS ST TWIN FALLS 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.			o. <u>ixex</u> register			
Office Held Nam			Street or PO Address		City	State	Country	Postal Code
MEMBER KEV	in scot	T OWENS	21 Granda Pl		BURLEY	ID	USA	83318
5. Organized Under the Laws of: ID W 133486		6. Annual Report must be signed.* Signature: Betty Thieman Name (type or print): Betty Thieman			Date: 02/16/2015 Title: Secretary			
Processed 02/16/2015		* Electronically provided signatures are accepted as original signatures.						