No. <b>C 210761</b>		Due no later than Aug 31, 2018		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		Annual Report Form  1. Mailing Address: Correct in this box if needed.  DNV GL HEALTHCARE USA, INC. 1400 RAVELLO DRIVE KATY TX 77449		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705  3. New Registered Agent Signature:*			
		ess Addresses of Pro	esident, Secretary, and Directors. Treasurer ( Street or PO Address	optional). City	State	Country	Postal Code
PRESIDENT SECRETARY TREASURER DIRECTOR	PATRICK HORINE DARREL SCOTT NATHAN WILSON GARY DAVIS		1400 RAVELLO DRIVE 400 TECHNE CENTER DRIVE SUITE 350 1400 RAVELLO DRIVE 1400 RAVELLO DRIVE	KATY	TX OH TX TX	USA USA USA USA	77449 45150-3710 77449 77449
5. Organized Under the Laws of:  DE C 210761		6. Annual Report n Signature: Mano Name (type or p	Date: 07/12/2018 Title: POA				
Processed 07/12/2018		* Electronically prov	vided signatures are accepted as original signa	atures.			