

No. W 111055		Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. INNOVATION HEALTH SERVICES, PLLC LESLIE KELLY-MAJORS 261 SKYLARK DR BOISE ID 83702		LESLIE KELLY-MAJORS 261 SKYLARK DR BOISE ID 83702			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name LESLIE S. KELLY-MAJORS	Street or PO Address 261 SKYLARK DR.		City BOISE	State ID	Country USA	Postal Code 83702
5. Organized Under the Laws of: ID W 111055		6. Annual Report must be signed.* Signature: Leslie Kelly-Majors Name (type or print): Leslie Kelly-Majors Date: 01/03/2014 Title: Owner					
Processed 01/03/2014 * Electronically provided signatures are accepted as original signatures.							