No. <b>W 3073</b>		Due	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		DARRYL B. (	DARRYL B. COOK, M.D.			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.  SOUTHEAST IDAHO GASTROENTEROLOGY, P.L.L.C. DARRYL B. COOK, M.D.  1151 HOSPITAL WAY BLDG A POCATELLO ID 83204		1151 HOSPITAL WAY BLDG A POCATELLO ID 83205  3. New Registered Agent Signature:*				
				4. Limited Liability Compa	nies: Enter Nar	mes and Addresses	of at least one Member or Manager.	
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	DARRYL B.	COOK, M.D.	7492 W. PORTNEUF RD.	POCATELLO	ID	USA	83201	
MEMBER	THOMAS V.	DAVIS, D.O.	PO BOX 159	INKOM	ID	USA	83245	
MEMBER	CHARLES B	EVANS	PO BOX 4788	POCATELLO	ID	USA	83205	
5. Organized Under the Laws of:		6. Annual Report r						
ID W 3073		Signature: Darryl B Cook		Date: 08/22/2011				
		Name (type or print): Darryl B Cook		Title: Member				
Processed 08/22/2011		* Electronically pro	vided signatures are accepted as original s	signatures.				