

No. <b>W 106116</b>		<b>Due no later than Aug 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  APHELION MEDICAL SOLUTIONS, LLC SCOTT LANEY 2206 N HARRISON BLVD BOISE ID 83702 USA		SCOTT LANEY 2206 N HARRISON BLVD BOISE ID 83702			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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 SCOTT LANEY	Street or PO Address 2206 N HARRISON BLVD		City BOISE	State ID	Country USA	Postal Code 83702
5. Organized Under the Laws of:  <b>ID</b> <b>W 106116</b>		6. Annual Report must be signed.*  Signature: Scott Laney Name (type or print): Scott Laney  Date: 06/25/2015 Title: owner					
Processed 06/25/2015      * Electronically provided signatures are accepted as original signatures.							