Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-D080 NO FEE REQUIRED  * FIRST NOTICE *  Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of  Managers or  Members (check one)	lo.	W	9	71	16		nual Report Fo		2. Registered Agent a		
PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED  * FIRST NOTICE *  BOISE  BOISE  ID 83702  ID W 9116  Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)  Office held  Name  Street or P.O. Address  City  State  Zip  Signature of New Registered Agent  Signature  Name  Signature  Signature  Date  10 837  3. Organized Under the Laws of:  3. Organized Under the Laws of:  3. Organized Under the Laws of:  4. Organized Under the Laws of:  5. Organized Under the Laws of:  4. Organized Under the Laws of:  5. Organized Under the Laws of:  4. Organized Under the Laws of:  5. Organized Under the Laws of:  6. Organized Under the Laws of:  7. Organized Under the Laws of:  8. Organized Under the Laws of:  8. Organized Under the Laws of:  8. Organized Under the Laws of:  9. Organized Under the Laws of:  9. Organized Under the Laws of:	SECF	RETAR				1. Mailing Address -	Please Çorrect, If N	lot Correct			
* FIRST NOTICE * BOISE ID 83702 ID W 9116  Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)  Office held Name Street or P.O. Address City State Zip  SEE ATTACHED LIST  Signature of New Registered Agent  Signature Addresses of Managers or Members (check one)  Date 91159  Name (Topedor Policy Address Date Title Registered Agent Name Policy Address Date Title Registered Agent Name Title Registered Agent Name Title Registered Agent Name Policy Date Policy Manager Name Name Policy Date Name Title Registered Agent Name Name Policy Date Name Name Name Name Name Name Name Nam	PO B BOIS	OX 83 E, ID 8	720 33720	)- )- )-	080	PATRICK J	MILLER				83702
Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)  Office held Name Street or P.O. Address City State Zip  SEE ATTACHED LIST  Signature of New Registered Agent  Signature Agent  Signature Agent  Name Linguity Address  Date 11879  Name Linguity Address  Title Registers Agent						CATCC	<b>T</b> !	ስ <i>ዘጃን</i> በን			114
Signature of New Registered Agent  Signature of New Registered Agent  Signature Admid Date 9/2/59  Name (Typest or Particle J. M. The Registers Age	Co	rporati	ons:	Ent	er Names and	Business Addresses o	f President, Secre	tary and Directors			110
Signature of New Registered Agent  Signature AMM Date 9/10/59  Name Profesor Particle I.M. Title Registered Me	Off	ice held	₫	:	Name		Street or P.O. Add	Iress	City	<u>State</u>	Zip
Signature of Months Date 9/20159  Name (Typed or Printed) Pathick I.M. The Posyster Age	SE	E AT	TAC	HE	D LIST						
Signature of Months Date 9/20159  Name (Typed or Printed)  Name (Typed or Printed)  Name (Typed or Printed)				٠							
Signature of Months Date 9/20159  Name (Typed or Printed)  Name (Typed or Printed)  Name (Typed or Printed)											
Signature of Months Date 9/20159  Name (Typed or Printed)  Name (Typed or Printed)  Name (Typed or Printed)											]
Signature of Months Date 9/20159  Name (Typed or Particle J. M. The Pagester) Age											
Signature of Months Date 9/20159  Name (Typed or Printed)  Name (Typed or Printed)  Name (Typed or Printed)				:							
Name Myseld of Patrick I.M.The Title Registers Se	Sigr	nature	of	Nev	w Registered	Agent 6.	21	1			
Printed				٠		Sign	ature &M	mul	Date	112159	7
ISSUED: 07-03-1999 4233						Nam	ne (Typed or Part)	Mik I. M.Th	Title	Rogister	is beat
		ISS	UEC	<b>)</b> :	07-03-1	999	nice studious men		4	233	
											•
				:							

## MEMBER NAME

Idaho Nephrology Associates, LLC

Saint Alphonsus Diversified Care, Inc.

Richard A. Hearn

## <u>ADDRESS</u>

5610 W. Gage Street

Suite A

Boise, Idaho 83706

1055 N. Curtis Road

Boise, Idaho 83706

c/o Portneuf Nephrology Center

2001 Bench Road

Boise, Idaho 83201

STATE OF TRANS