

No. W 57650		Due no later than Dec 31, 2011		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		1. Mailing Address: Correct in this box if needed. SOUTHERN IDAHO CARDIOLOGY, PLLC JOHN COLEMAN PO BOX 1293 TWIN FALLS ID 83303		DAVID KEMP, MD 401 GOODING ST N, SUITE 201 TWIN FALLS ID 83301			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	DAVID KEMP, MD	401 GOODING ST N, SUITE 201	TWIN FALLS	ID	USA	83301	
MEMBER	REED J HARRIS	3375 NORTH 3000 EAST	TWIN FALLS	ID	USA	83301	
MEMBER	DANIEL C BROWN	771 RIVERVIEW DRIVE	TWIN FALLS	ID	USA	83301	
MEMBER	DENNIS ENOMOTO	PO BOX 1293	TWIN FALLS	ID	USA	83303	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 57650		Signature: John Coleman				Date: 12/01/2011	
		Name (type or print): John Coleman				Title: Agent	
Processed 12/01/2011		* Electronically provided signatures are accepted as original signatures.					