

No. W 76969		Due no later than Aug 31, 2010		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		Annual Report Form		DAVID D SUNDHOLM 34 TERRACE CIRCLE HAILEY ID 83333			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		MD MEDICAL LLC DAVID D SUNDHOLM PO BOX 6737 KETCHUM ID 83340 USA					
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 D SUNDHOLM	P.O. BOX 6737	KETCHUM	ID	USA	83340	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 76969		Signature: David Sundholm			Date: 09/13/2010		
		Name (type or print): David Sundholm			Title: Pres		
Processed 09/13/2010		* Electronically provided signatures are accepted as original signatures.					