

No. W 11085		Due no later than Feb 29, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MCCARTY'S SACRO-EASE, L.L.C. C/O INLAND NW SPINE 850 W IRONWOOD DR #300 COEUR D'ALENE ID 83814		ROBERT J FASNACHT 850 IRONWOOD DR STE 101 COEUR D'ALENE ID 83814			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name MICHELE L DIRKS	Street or PO Address 2410 E SUMMIT		City COEUR D'ALENE	State ID	Country USA	Postal Code 83815
5. Organized Under the Laws of: ID W 11085		6. Annual Report must be signed.* Signature: Michele Dirks Name (type or print): Michele Dirks Date: 01/09/2012 Title: Manager					
Processed 01/09/2012 * Electronically provided signatures are accepted as original signatures.							