

No. W 10640		Due no later than Dec 31, 2013		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. TARGHEE WOMENS CLINIC, P.L.L.C. GARY L. LOVELL 37 SOUTH 2ND EAST, SUITE 200 REXBURG ID 83440		DR GARY L LOVELL 37 SOUTH 2ND EAST, SUITE 200 REXBURG ID 83440			
				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	GARY L LOVELL MD	37 SOUTH 2ND EAST, SUITE 200	REXBURG	ID	USA	83440	
MEMBER	ROBERT E MEREDITH	37 SOUTH 2ND EAST, SUITE 200	REXBURG	ID	USA	83440	
5. Organized Under the Laws of: ID W 10640		6. Annual Report must be signed.* Signature: Gary L Lovell Name (type or print): Gary L Lovell Date: 12/09/2013 Title: Md					
Processed 12/09/2013		* Electronically provided signatures are accepted as original signatures.					