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|--|---------------|---|-------|--|---------|-------------|--|
| No. W 172208 | | Due no later than Sep 30, 2018 | | 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. SHARP MEDICAL STAFFING LLC 10707 PACIFIC STREET, #200 OMAHA NE 68114 | | C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 | | | |
| | | | | 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 | |
| MANAGER | REBECCA JONES | SHARP MEDICAL SOLUTIONSLLC 2611 SOUTH 159TH PLAZA | OMAHA | NE | USA | 68130 | |
| 5. Organized Under the Laws of: NE W 172208 | | 6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann | | | | | |
| Date: 08/07/2018 Title: POA | | | | | | | |
| Processed 08/07/2018 | | * Electronically provided signatures are accepted as original signatures. | | | | | |