No. W 30582		Due no later than May 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. M GROUP, L.L.C. ARNE E MICHALSON MD P.O. BOX 3289 HAYDEN ID 83835		2327 E. WO HAYDEN {	ARNE E MICHALSON MD 2327 E. WOODSTONE DR.			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar								
Office Held Name		mes and Addresses o	Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER	ARNE E MICHALSON MD LINDA SUE MICHALSON MD		P.O. BOX 3289 P.O. BOX 3289	HAYDEN HAYDEN	ID ID	,	83835 83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 30582		Signature: ARNE MICHALSON Name (type or print): ARNE MICHALSON			Date: 04/05/2015 Title: PARTNER			
Processed 04/05/2015		* Electronically provi	ided signatures are accepted as origi	inal signatures.				