No. W 96874		Due no later than Oct 31, 2015		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form 1. Mailing Address: Correct in this box if needed. SUNRISE MIDWIFERY SERVICES, LLC LAUNA JANSSEN-CAMPBELL 445 BENNINGTON CANYON RD			UNITED STATES CORPORATION AGEN 950 BANNOCK ST STE 1100 BOISE ID 83702			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				10 10 10 10 10 10 10 10 10 10 10 10 10 1				
				BOISE ID 0.				
		MONTPELIER ID 83254		3. New Registered Agent Signature:*				
4. Limited Liability Co	mpanies: Enter Na	mes and Addresses of	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	IANAGER LAUNA JANSSEN-CAMPBELL		445 BENNINGTON CANYON RD	MONTPELIER	ID	USA	83254	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 96874		Signature: Launa Janssen-Campbell			Date: 08/15/2015			
		Name (type or print): Launa Janssen-Campbell		Title: owner				
Processed 08/15/201	.5	* Electronically provi	ded signatures are accepted as original s	signatures.				