No. C 155790		Due no later than Jul 31, 2017		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		10 MORNING ADMINISTRAÇÃO AND ANDRE	R BURKE ARCHIBALD MD 100 E IDAHO ST STE 400 BOISE ID 83712 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. R. BURKE ARCHIBALD, M.D., P.A. R BURKE ARCHIBALD MD 100 E IDAHO ST #400 BOISE ID 83712		BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Trea	asurer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
SECRETARY DIRECTOR PRESIDENT	DIRECTOR R BURKE ARCHIBAI		100 E IDAHO ST #400 100 E IDAHO ST #400 100 E IDAHO ST #400	BOISE BOISE BOISE	ID ID ID	USA USA USA	83712 83712 83712	
5. Organized Under the Laws of: ID C 155790		6. Annual Report must be signed.* Signature: R. Burke Archibald				6/19/2017		
		Name (type or print): R. Burke Archibald Title: PRESIDENT						
Processed 06/19/2017 * Electronically provided signatures are accepted as original signatures.								