

No. W 123361	Due no later than Mar 31, 2015 Annual Report Form		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. MICA PEAK MEDICAL LLC THOMAS HULL 1405 E YOUNG AVE COEUR D ALENE ID 83814 USA		THOMAS R HULL MD 1405 E YOUNG AVE COEUR D ALENE 83814			
			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	THOMAS RICHARD HULL	1405 E. YOUNG AVE.	COEUR D ALENE	ID	USA	83814
5. Organized Under the Laws of: ID W 123361	6. Annual Report must be signed.* Signature: T. R. Hull, MD Name (type or print): T. R. Hull, MD		Date: 01/18/2015 Title: owner			
Processed 01/18/2015		* Electronically provided signatures are accepted as original signatures.				