No. W 96190		Due no later than Sep 30, 2018		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			MICHAEL J WHYTE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. EMERGENCY OTOLARYNGOLOGY SERVICES, PLLC DANIEL K HINCKLEY 2065 E 17TH STREET A		2635 CHANNING WAY IDAHO FALLS ID 83404 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE		IDAHO FALLS ID 83404						
4. Limited Liability Comp	panies: Enter Nai	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	DANIEL K HINCKLEY		2065 E 17TH STREET SUITE A	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: troy clayton		Date: 08/01/2018				
W 96190		Name (type or print): troy clayton		Title: accountant				
Processed 08/01/2018 * Electronically provided signatures are accepted as original signatures.								