No. W 92911		Due no later than Apr 30, 2013	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. LINK MEDICAL CONSULTING, LLC C/O WAYNE BARNEY C/O WAYNE BARNEY 1524 SOUTH VISTA STE. 12 BOISE ID 83705	BC BUSINESS SERVICES INC C/O WAYNE BARNEY 1524 SOUTH VISTA STE. 12 BOISE ID 83705 3. New Registered Agent Signature:*			
		l mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	PAUL M LIN	K C/O WAYNE BARNEY 1524 SOUTH VISTA STE. 12	BOISE	ID	USA	83705
5. Organized Under the Laws of:		6. Annual Report must be signed.*	D. L 02 (12/2012		
ID W 92911		Signature: Wayne Barney	Date: 02/13/2013			
N N N N		Name (type or print): Wayne Barney Title: Registered Agent Rep.				
Processed 02/13/20	13	* Electronically provided signatures are accepted as original sig	natures.			