

No. W 98813		Due no later than Dec 31, 2011 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		1. Mailing Address: Correct in this box if needed. BENCHMARK FAMILY DENTISTRY, PLLC NANCY K NELSON 4552 N CLOVERDALE RD BOISE ID 83713 USA		TROY A CLOVIS 4552 N CLOVERDALE RD BOISE ID 83713			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name SARAH S HUNT	Street or PO Address 4552 N CLOVERDALE RD		City BOISE	State ID	Country USA	Postal Code 83713-2417
5. Organized Under the Laws of: ID W 98813		6. Annual Report must be signed.* Signature: Nancy Nelson Name (type or print): Nancy Nelson Date: 01/10/2012 Title: Bookkeeper					
Processed 01/10/2012 * Electronically provided signatures are accepted as original signatures.							

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