No. W 124479		Due no later than Apr 30, 2016	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. SWEEN FAMILY DENTISTRY, LLC CRAIG SWEEN PO BOX 2637 HAYDEN ID 83835	618 N 4TH S COEUR D AI	HOLT LAW OFFICE PLLC 618 N 4TH ST COEUR D ALENE ID 83814 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER CRAIG SWE		EN PO BOX2637	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of: ID W 124479		6. Annual Report must be signed.* Signature: RobertCraigSween Name (type or print): RobertCraigSween	Date: 03/14/2016 Title: owner				
Processed 03/14/2016 * Electronically provided signatures are accepted as original signatures.							