No. C 173487		Due no later than Jun 30, 2015 2. Registered Agent and Address (NO PO BOX)					
Return to:		Annual Report Form Tyler John Harrington					
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MOUNTAIN VIEW DENTISTRY, P.C. ASHLEE BEHLER 321 GRANGEVILLE TRUCK RTE GRANGEVILLE ID 83530		321 GRANGEVILLE TRUCK RTE GRANGEVILLE ID 83530 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA					
4. Corporations: Enter Na	mes and Busin	ess Addresses of Pre	esident, Secretary, and Directors. Treasure	er (optional).			
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
PRESIDENT SECRETARY DIRECTOR	ECRETARY ASHLEE R BEHLER		321 GRANGEVILLE TRUCK RTE 321 GRANGEVILLE TRUCK RTE 321 GRANGEVILLE TRUCK RTE	GRANGEVILLE GRANGEVILLE GRANGEVILLE	ID ID ID	USA USA USA	83530 83530 83530
5. Organized Under the Laws of: ID C 173487		6. Annual Report must be signed.* Signature: Ashlee Behler Name (type or print): Ashlee Behler			Date: 07/		
Processed 07/13/2015	* Electronically provided signatures are accepted as original signatures.						