

No. W 51762		Due no later than Jun 30, 2010		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		1. Mailing Address: Correct in this box if needed. OLER DENTAL PLLC CAMERON D OLER 1411 FALLS AVE EAST 1329 TWIN FALLS ID 83301		CAMERON D OLER 1411 FALLS AVE EAST 1329 TWIN FALLS ID 83301			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CAMERON D OLER	2041 STADIUM BLVD	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 51762		Signature: Cameron OLER				Date: 07/09/2010	
		Name (type or print): Cameron OLER				Title: Owner	
Processed 07/09/2010		* Electronically provided signatures are accepted as original signatures.					