

No. W 42419		Due no later than Aug 31, 2016		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. TEETH MAKERS LLC RENTAL JACQUELINE MABREY 1119 N 4TH ST COEUR D'ALENE ID 83814-3216		JACQUELINE MABREY 1119 N 4TH ST COEUR D'ALENE ID 83814-3216	
				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	JACQUELINE MABREY	1119 N 4TH ST	COEUR D'ALENE	ID	83814
MEMBER	KIMBERLEE VERBRUGGE	1119 N 4TH ST	COEUR D'ALENE	ID	83814
5. Organized Under the Laws of: ID W 42419		6. Annual Report must be signed.* Signature: Carol Stipek Name (type or print): Carol Stipek Date: 06/21/2016 Title: Administrative Assistant			
Processed 06/21/2016		* Electronically provided signatures are accepted as original signatures.			