

No. W 136792		Due no later than Apr 30, 2017		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. IDAHO MOBILE SMILES, LLC AMANDA SCHLOFMAN 22351 AURA VISTA WAY CALDWELL ID 83607		AMANDA SCHLOFMAN 22351 AURA VISTA WAY CALDWELL ID 83607-8360			
				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	AMANDA SCHLOFMAN	22351 AURA VISTA WAY	CALDWELL	ID	USA	83607	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 136792		Signature: Amanda Schlofman				Date: 02/28/2017	
		Name (type or print): Amanda Schlofman				Title: Office Manager	
Processed 02/28/2017		* Electronically provided signatures are accepted as original signatures.					