No. <b>W 138733</b>		Due no later than Jun 30, 2018		2. Registered	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.  PAUL JJ CLAWSON DDS, PLLC PAUL JJ CLAWSON 776 E RIVERSIDE DRIVE SUITE 240 EAGLE ID 83616		5320 N LAN MERIDIAN	PAUL JJ CLAWSON 5320 N LANDON PLACE MERIDIAN ID 83646  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE			land on Marchael of Marchael					
4. Limited Liability Comp	panies: Enter Nai	mes and Addresses of a	least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER PAUL CLAWSON		2151 W. AUTUMN CREST CT.	EAGLE	ID	USA	83616		
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Paul Clawson			Date: 05/11/2018			
W 138733		Name (type or print): Paul Clawson			Title: member			
Processed 05/11/2018 * Electronically provided signatures are accepted as original signatures.								