

No. W 11399	Due no later than Mar 31, 2018 Annual Report Form	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. ALLEN & WIDMIER, L.L.C. KENT J. ALLEN PO BOX B KIMBERLY ID 83341	KENT J ALLEN, DDS 702 CENTER STREET WEST KIMBERLY ID 83341	
		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
MANAGER	KENT J ALLEN DDS	702 CENTER STREET WEST	KIMBERLY ID USA 83341
5. Organized Under the Laws of: ID W 11399	6. Annual Report must be signed.* Signature: Kent J. Allen Name (type or print): Kent J. Allen		Date: 01/25/2018 Title: Manager
Processed 01/25/2018		* Electronically provided signatures are accepted as original signatures.	