

No. W 44950		Due no later than Nov 30, 2013		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		CARSON MOONEY 782 S AMERICANA BLVD BOISE ID 83702			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		SUMMIT DENTAL GROUP, P.L.L.C. CARSON MOONEY 782 S. AMERICANA BLVD. BOISE ID 83702 USA					
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	CARSON A MOONEY	782 S. AMERICANA BLVD	BOISE	ID	USA	83702	
MEMBER	ROBERT STUDEBAKER	782 S. AMERICANA BLVD	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 44950		Signature: C.A.Schall			Date: 09/27/2013		
		Name (type or print): C.A.Schall			Title: Bookkeeper		
Processed 09/27/2013		* Electronically provided signatures are accepted as original signatures.					