No. W 79965		Due no later than Dec 31, 2015		2	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. WILSON, D.D.S., L.L.C. KORY J WILSON 1683 E MILES AVE HAYDEN LAKE ID 83835			KORY J WILSON D.D.S. 1683 E MILES AVE HAYDEN LAKE ID 83835 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Con	npanies: Enter Nai	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER KORY J WILSON		SON	1683 E. MILES AVE		HAYDEN LAKE	ID	USA	83835
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 79965		Signature: Kory J Wilson			Date: 01/18/2016			
		Name (type or print): Kory J Wilson			Title: Owner			
Processed 01/18/2016 * Electronically provided signatures are accepted as original signatures.								