No. <b>W 43817</b>		Due no later than Oct 31, 2013		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			BRIAN GALBRATH			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SUN VALLEY DENTAL GROUP, PLLC  BRIAN GALBRAITH  PO BOX 3360  KETCHUM ID 83340		KETCHUM II	181 FIRST AVE N KETCHUM ID 83340  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		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	IEMBER BRIAN C GALBRAITH		181 FIRST AVE NORTH	KETCHUM	ID	USA	83340	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 43817		Signature: Brian Galbraith			Date: 11/13/2013			
		Name (type or		Title: President				
Processed 11/13/2013 * Electronically provided signatures are accepted as original signatures.								