

No. <b>W 109741</b>		<b>Due no later than Jan 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  BUHL FAMILY DENTAL, LLC. TODD AMES 161 5TH AVE S, STE 200 TWIN FALLS ID 83301		DUSTIN NAVARRO 529 BROADWAY AVE S BUHL ID 83316	
				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
MEMBER	GOODING FAMILY DENTAL INC	325 MAIN ST	GOODING	ID	USA 83330
5. Organized Under the Laws of:  <b>ID W 109741</b>		6. Annual Report must be signed.* Signature: L. Todd Ames Name (type or print): L. Todd Ames Date: 11/17/2015 Title: CPA			
Processed 11/17/2015		* Electronically provided signatures are accepted as original signatures.			