

No. W 157500		Due no later than Oct 31, 2017		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. INFINITY DENTAL, PLLC TRAVIS SHEPHERD 622 CENTER ST WEST KIMBERLY ID 83341		TRAVIS SHEPHERD 622 CENTER STREET W 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	TRAVIS TRENT SHEPHERD	622 CENTER STREET W	KIMBERLY	ID	USA	83341	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 157500		Signature: Travis				Date: 09/29/2017	
		Name (type or print): Travis				Title: President/Owner	
Processed 09/29/2017		* Electronically provided signatures are accepted as original signatures.					