

No. W 98333		Due no later than Dec 31, 2011		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. DENTISTRY 4 CHILDREN, PLLC LAURIE LESTER 3326 4TH STREET #4 LEWISTON ID 83501-4455 USA		JEREMY C WIGGINS DDS 3326 FOURTH ST SUITE 4 LEWISTON ID 83501-4455			
				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	CYNTHIA M WIGGINS	3326 4TH STREET SUITE 4	LEWISTON	ID	USA	83501-4455	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 98333		Signature: Laurie Lester				Date: 10/11/2011	
		Name (type or print): Laurie Lester				Title: Office Manager	
Processed 10/11/2011		* Electronically provided signatures are accepted as original signatures.					