

No. W 55552		Due no later than Oct 31, 2010		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. MILLCREEK DENTAL LABORATORY, LLC DARREN G EVANS 1483 STONERIDGE DR POCATELLO ID 83201 USA		DARREN G EVANS 1483 STONERIDGE DR POCATELLO ID 83201			
				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	DARREN G EVANS	829 WASHBURN	POCATELLO	ID	USA	83201	
MANAGER	EMILEE B EVANS	829 WASHBURN	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: ID W 55552		6. Annual Report must be signed.* Signature: Emilee Evans Name (type or print): Emilee Evans					
Date: 10/31/2010 Title: Manager							
Processed 10/31/2010		* Electronically provided signatures are accepted as original signatures.					