| No. <b>W 136614</b>  |   | ie no later than Apr 30, 2016                      | 2. Registered A  | 2. Registered Agent and Address (NO PO BOX) |         |             |  |
|--|---|--|--|---|---------|-------------|--|
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 | 1. Mailing A  IDEAL FAMILY JOHN COBUR 700 W. IRONV                        | WOOD DR STE 241                                    | JOHN COBURN DMD 700 W. IRONWOOD DR STE 241 COEUR D ALENE ID 83814-8381 |   |         |             |  |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter No                 |   | NE ID 83814  es of at least one Member or Manager. | 3. <u>New</u> Registe  | 3. <u>New</u> Registered Agent Signature:*  |         |             |  |
| Office Held Name   |   | Street or PO Address                               | City   | State                                       | Country | Postal Code |  |
| MEMBER JOHN DAVI   | D COBURN  | 6863 N VALLEY ST                                   | DALTON<br>GARDENS  | ID  | USA     | 83815       |  |
| 5. Organized Under the Laws of: 6. Annual Report must be signed.*                              |   |  |  |   |         |             |  |
| п  | Signature: Melissa Coburn   |  |  | Date: 03/08/2016                            |         |             |  |
| W 136614   | Name (type or print): Melissa Coburn                                      |  |  | Title: bookkeeper                           |         |             |  |
| Processed 03/08/2016   | * Electronically provided signatures are accepted as original signatures. |  |  |   |         |             |  |