

No. W 69349		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. CASTLEBURY DENTAL, LLC S&S LEGAL DOCUMENTS, LLC 3006 E. GOLDSTONE DR. STE. 101 MERIDIAN ID 83642		S&S LEGAL DOCUMENTS, LLC 3006 GOLDSTONE DR STE 101 MERIDIAN ID 83642 USA			
				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	JACOB MICHAEL BROWN	2208 E SIDEWINDER DR	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 69349		Signature: Jacob Brown				Date: 01/09/2012	
		Name (type or print): Jacob Brown				Title: Manager	
Processed 01/09/2012		* Electronically provided signatures are accepted as original signatures.					