No. <b>W 90139</b>		Due no later than Jan 31, 2014		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			PERRY LAW PC			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  PETERSON ORTHODONTICS, PLLC  KELSEY PETERSON  1312 S WASHINGTON ST STE C  EMMETT ID 83617		BOISE ID 8	2627 W IDAHO ST BOISE ID 83702  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER KELSEY M P		PETERSON	3021 GALA TRAIL	EMMETT	ID	USA	83617	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kelsey Peterson			Date: 02/06/2014			
W 90139		Name (type or		Title: Owner				
Processed 02/06/2014 * Electronically provided signatures are accepted as original signatures.								