No. W 126208		Due no later than Jun 30, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			RYAN M NIELSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RYAN M. NIELSON, DDS, PLLC RYAN M NIELSON 1411 FALLS AVE. SUITE 1000C TWIN FALLS ID 83301		POCATELLO	201 E CENTER ST POCATELLO ID 83201 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	RYAN M. NIELSON		1411 FALLS AVE. SUITE 1000C	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Eric L. Olsen		Date: 0	Date: 04/14/2014			
W 126208		Name (type or print): Eric L. Olsen		Title: Registered Agent				
Processed 04/14/2014 * Electronically provided signatures are accepted as original signatures.								