

No. W 169324	Due no later than Jul 31, 2018 Annual Report Form		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. DENTBUSTERZ, LLC MARTIN ZURITA 532 DOUGLAS AVE IDAHO FALLS ID 83401		MARTIN I ZURITA 532 DOUGLAS AVE IDAHO FALLS ID 83401			
			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	MARTIN I ZURITA	532 DOUGLAS AVE	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID W 169324	6. Annual Report must be signed.* Signature: Martin Zurita Name (type or print): Martin Zurita		Date: 08/13/2018 Title: Owner			
Processed 08/13/2018		* Electronically provided signatures are accepted as original signatures.				