No. <b>W 20457</b>		Due no later than Aug 31, 2012		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  NDC, LLC CARRICK C BREWSTER 702 W IDAHO STE 700 BOISE ID 83701		702 W IDAH BOISE ID	J KEVIN WEST 702 W IDAHO STE 700 BOISE ID 83701  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
Office Held	nies: Enter Nai Name	mes and Addresses	of at least one Member or Manager.  Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER	SCOTT E HAYHURST DMD CARRICK BREWSTER DDS		7337 W NORTHVIEW 7337 W NORTHVIEW	BOISE BOISE	ID ID	USA USA	83704 83704	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Carri		Date: 08/28/2012				
W 20457		Name (type or p		Title: Member				
Processed 08/28/2012 * Electronically provided signatures are accepted as original signatures.								