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| No. W 105820 | Due no later than Aug 31, 2013 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. | | RICHARD DAVIS 329 E LOGAN ST CALDWELL ID 83605 | | | |
| | PLATINUM DENTAL PLLC RICH DAVIS 329 E LOGAN ST CALDWELL ID 83605 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 | RICHARD R DAVIS | 329 E LOGAN ST | CALDWELL | ID | USA | 83605 |
| 5. Organized Under the Laws of: ID W 105820 | | 6. Annual Report must be signed.* Signature: Richard Davis Name (type or print): Richard Davis | | Date: 06/18/2013 Title: Manager | | |
| Processed 06/18/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | |