

No. <b>W 130913</b>		<b>Due no later than Nov 30, 2014</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> SLEEPY SMILES ANESTHESIA, PLLC PAUL DICKINSON 1115 8TH AVENUE E JEROME ID 83338		PAUL DICKINSON 1115 8TH AVENUE E JEROME 83338	
				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	PAUL DICKINSON	1115 8TH AVE E	JEROME	ID	USA 83338
5. Organized Under the Laws of:  <b>ID W 130913</b>		6. Annual Report must be signed.* Signature: Paul D Name (type or print): Paul D Date: 10/04/2014 Title: President			
Processed 10/04/2014		* Electronically provided signatures are accepted as original signatures.			