

No. <b>W 133969</b>		<b>Due no later than Feb 28, 2018</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> LAKE HARBOR DENTAL, PLLC MICHAEL E PETERSON 5355 W STATE ST BOISE ID 83703		ERIC BALLOU 5355 W STATE ST BOISE ID 83703	
				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
MEMBER	MICHAEL E PETERSON, D.D.S., P.A.	5355 W STATE ST	BOISE	ID	83703
5. Organized Under the Laws of:  <b>ID W 133969</b>		6. Annual Report must be signed.* Signature: michael e peterson Name (type or print): michael e peterson Date: 02/08/2018 Title: owner			
Processed 02/08/2018		* Electronically provided signatures are accepted as original signatures.			