

No. W 165919	Due no later than May 31, 2017 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.		MARK T MCDONALD 1601 12TH AVE RD SUITE 103 NAMPA ID 83686-8368			
	MARK T. MCDONALD, DDS, PLLC MARK T MCDONALD 1601 12TH AVE RD SUITE 103 NAMPA ID 83686 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
MEMBER	MARK T MCDONALD	1601 12TH AVE RD SUITE 103	NAMPA	ID	USA	83686
5. Organized Under the Laws of: ID W 165919		6. Annual Report must be signed.* Signature: Mark T McDonald Name (type or print): Mark T McDonald Date: 06/27/2017 Title: Member				
Processed 06/27/2017		* Electronically provided signatures are accepted as original signatures.				