No. C 179438		Due no later than Jul 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. MCKAY D. BARLOW, D.D.S., P.C. KAY PARKER 1399 FILLMORE ST. N. 501 TWIN FALLS ID 83301		2. Registered Ag	2. Registered Agent and Address (NO PO BOX) MCKAY D BARLOW 1399 FILLMORE ST N 501 TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				1399 FILLMOR 501				
		ess Addresses of	President, Secretary, and Directors. Treas		61.1		D	
Office Held	Name	DI OW	Street or PO Address	City	State	Country	Postal Code	
SECRETARY PRESIDENT			1184 MONACO ST. 1184 MONACO ST.	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:		6. Annual Repo	rt must be signed.*					
ID		Signature: McKay Barlow			Date: 05/24/2018			
C 179438		Name (type or print): McKay Barlow			Title: President			
Processed 05/24/2018		* Electronically	provided signatures are accepted as origina	l signatures.				