No. **W 7569**	**Due no later than Dec 31, 2017**	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**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** BAKER & JEPSEN, LLC MARK E BAKER PO BOX 6033 POCATELLO ID 83205	MARK E BAKER 165 N 14TH POCATELLO ID 83201 3. New 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 E BAKER	165 N 14TH AVE	POCATELLO	ID		83201
MEMBER	SHAWN A JEPSEN	165 N. 14TH AVE	POCATELLO	ID		83201

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 7569**	Signature: Mark Baker	Date: 11/15/2017
	Name (type or print): Mark Baker	Title: Oral Surgeon-Owner

Processed 11/15/2017

* Electronically provided signatures are accepted as original signatures.