

No. W 98594	Due no later than Dec 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.		IDAHO SERVICE COMPANY 999 W MAIN ST STE 1300 BOISE ID 83702			
	WOLD AND WOLD FAMILY DENTISTRY, LLC JOHN D WOLD 600 E RIVERPARK LN STE 140 BOISE ID 83706		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	VALERIE A CASTRO	600 E. RIVERPARK LN. STE 140	BOISE	ID	USA	83706
5. Organized Under the Laws of: ID W 98594		6. Annual Report must be signed.* Signature: Valerie A. Castro Name (type or print): Valerie A. Castro Date: 10/30/2017 Title: Office Manager				
Processed 10/30/2017		* Electronically provided signatures are accepted as original signatures.				