

No. W 83100	Due no later than Apr 30, 2015 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.		ANDREW L BARRETT 1658 RAINIER DR POCATELLO 83201			
	ASPEN DENTAL LAB L.L.C. ANDREW L BARRETT PO BOX 4987 POCATELLO ID 83205		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	BRADY L THOMAS	724 NORCREST	POCATELLO	ID	USA	83201
MEMBER	ANDREW L BARRETT	1658 RAINIER DR	POCATELLO	ID	USA	83201
5. Organized Under the Laws of: ID W 83100	6. Annual Report must be signed.* Signature: ANDREW BARRETT Name (type or print): ANDREW BARRETT		Date: 02/19/2015 Title: MEMBER			
Processed 02/19/2015		* Electronically provided signatures are accepted as original signatures.				