No. W 125682	Reinstatement Annual Report Form ADMIN DISSOLVED 08/14/2017	Registered Agent and Office     (NOT A P.O. BOX)     CORDELL DENTON NEBEKER
SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  LED PEDIATRIC DENTISTRY PLLC  CORDELL DENTON NEBEKER  10439 FALLOW FIELD STREET  NAMPA ID 83687-5156	10439 FALLOW FIELD ST NAMPA ID 83687
REINSTATEMENT FEE DUE: \$30.00		3. <u>New</u> Registered Agent Signature.
<ol> <li>Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</li> <li>Manager or Member Name Street or PO Address City State Country Postal Code</li> </ol>		
Manager Member Cordell Denton Nebeker 10439 Fallow Field Street Nampa ID United States 83687		
Manager Member		
Manager  Member		
Manager Member		
5. Organized Under the La	ws of: 6. Signature:	Date:
IDAHO	Sign load of	September 10, 2017
W 125682	Name (type or print):	Title:
Terued 00/10/2017 by colin	Cordell Denton Nebeker	Manager/Owner
Issued 09/10/2017 by onlin	1¢	