

<p>No. W 965</p>	<p>Reinstatement Annual Report Form ADMIN DISSOLVED 06/28/2017</p>		<p>2. Registered Agent and Office (NOT A P.O. BOX) R TERRY HALL 2355 AMERICAN LEGION BLVD MOUNTAIN HOME ID 83647</p>																																			
<p>Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080</p> <p>REINSTATEMENT FEE DUE: \$30.00</p>	<p>1. Mailing Address: Correct in this box if needed. DENTAL CENTER, P.L.L.C. R TERRY HALL 2355 AMERICAN LEGION BLVD. MOUNTAIN HOME ID 83647</p>		<p>3. <u>New</u> Registered Agent Signature.</p>																																			
<p>4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.</p> <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>R. Terry Hall</td> <td>2355 American Legion Blvd.</td> <td>Mountain Home</td> <td>ID</td> <td></td> <td>Elmore, 83647</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>K. Troy Stevens</td> <td>2355 American Legion Blvd.</td> <td>Mountain Home</td> <td>ID</td> <td></td> <td>Elmore, 83647</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	R. Terry Hall	2355 American Legion Blvd.	Mountain Home	ID		Elmore, 83647	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	K. Troy Stevens	2355 American Legion Blvd.	Mountain Home	ID		Elmore, 83647	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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<p>5. Organized Under the Laws of:</p> <p>IDAHO W 965</p>	<p>6. Signature: <u>R. Terry Hall</u></p> <p>Name (type or print): <u>R. Terry Hall</u></p>		<p>Date: <u>7/05/17</u></p> <p>Title: <u>Member</u></p>																																			
<p>Issued 07/05/2017 by online</p>																																						