

No. W 35678		Due no later than Jan 31, 2016		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. LARSEN DENTAL, LLC NW BILL LARSEN 114 W 100 S / P O BOX 345 GRACE ID 83241		N W (BILL) LARSEN 114 W 100 S GRACE ID 83241			
				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	
MANAGER	N W (BILL) LARSEN	P O BOX 345	GRACE	ID	USA	83241	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 35678		Signature: Suzanne Hardy				Date: 01/19/2016	
		Name (type or print): Suzanne Hardy				Title: office manager	
Processed 01/19/2016		* Electronically provided signatures are accepted as original signatures.					