| No. W 77696 | | Due no later than Sep 30, 2016 | | 2. Registered A | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|-----------|---|----------------------|---------------------------------------|---|----------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. BEVAN D.D.S. P.L.L.C. KENNETH J BEVAN DDS 802 N LINCOLN ST POST FALLS ID 83854 | | 802 N LINCO POST FALLS | KENNETH J BEVAN DDS 802 N LINCOLN ST POST FALLS ID 83854 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar | | | | J. <u>New</u> Registe | ereu Agent Si | gnature. | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | KENNETH J | BEVAN | 1683 E MILES AVE | HAYDEN | ID | USA | 83835 | |
| 5. Organized Under the Laws of: ID W 77696 | | 6. Annual Report Signature: Wi Name (type or | | Date: 07/26/2016 Title: Accounting | | | | |
| Processed 07/26/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |