

No. <b>W 103352</b>		<b>Due no later than May 31, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  FIVE MILE DENTAL, PLLC RICHARD HEEMEYER DMD 438 W BACALL DR MERIDIAN ID 83646		JON D HILL 339 W STATE ST STE 205 EAGLE ID 83616			
				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	RICHARD HEEMEYER	438 W BACALL DR	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 103352</b>		Signature: Richard Heemeyer				Date: 04/14/2016	
		Name (type or print): Richard Heemeyer				Title: Member	
Processed 04/14/2016		* Electronically provided signatures are accepted as original signatures.					