







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney REINSTATEMENT ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

Filing Fee: \$30.00 - Make Checks Payable to Secretary of State

For Office Use Only

-FILED-

File #: 0003624625

Date Filed: 9/18/2019 4:16:45 PM

Sign Here		Date
Ryan Hillam		09/18/2019
The Application for Reinstatement must be	e signed by at least one governor.	
RYAN HILLAM	Member	211 N WHITLEY DR STE 3 FRUITLAND, ID 83619
Name	Title	Address
imited Liability Company Managers and N	Members	
I affirm that the registered a The mailing address of the corporation is: 1820 N WHITLEY DR FRUITLAND, ID 83619-2108	gent appointed has conser	nted to serve as registered agent for this entity.
The name and street address of the new r Registered Agent	egistered agent and office in Idah	o is: Registered Agent Ryan Hillam Physical Address: 1820 N WHITLEY DR FRUITLAND, ID 83619 Mailing Address: 1820 N WHITLEY DR FRUITLAND, ID 83619-2108
The registered agent on record is: Need to appoint new agent		
Profession The business is organized to practice the profession of:		Medicine
Entity Name: Entity name		IDAHO ORAL SURGERY PLLC
Entity Subtype: Limited Liability Company Subty	/pe	Professional Limited Liability Company
Entity Type:		Limited Liability Company (D)
Organized under the laws of:		IDAHO
The file number of this entity on the records of the Idaho Secretary of State is:		ecretary 0000187202
Current Entity Name		IDAHO ORAL SURGERY PLLC
Reinstatement Annual Report Form Select one: Standard, Expedited or Same Day Service (see descriptions below)		e Standard (filing fee \$30)

Member

Signer's Title: