

No. <b>W 138733</b>		<b>Due no later than Jun 30, 2015</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>1. Mailing Address: Correct in this box if needed.</b> PAUL JJ CLAWSON DDS, PLLC PAUL JJ CLAWSON 1045 S ANCONA STE 150 EAGLE ID 83616		PAUL JJ CLAWSON 2151 W AUTUMN CREST COURT 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	PAUL CLAWSON	2151 W. AUTUMN CREST CT.	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 138733</b>		Signature: Paul Clawson				Date: 05/05/2015	
		Name (type or print): Paul Clawson				Title: Member	
Processed 05/05/2015		* Electronically provided signatures are accepted as original signatures.					