

No. <b>W 34733</b>		<b>Due no later than Nov 30, 2009</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> HUFF PROPERTIES, LLC DR TIMOTHY J HUFF DDS 3317 S LONGLEAF AVE BOISE ID 83716		DR TIMOTHY J HUFF DDS 3317 S LONGLEAF AVE BOISE ID 83716			
				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	DR TIMOTHY J HUFF DDS	6865 BEATRICE DR	FRUITLAND	ID	USA	83619	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 34733</b>		Signature: Tim Huff DDS				Date: 11/18/2009	
		Name (type or print): Tim Huff DDS				Title: Managing Member	
Processed 11/18/2009		* Electronically provided signatures are accepted as original signatures.					