

No. W 95853		Due no later than Aug 31, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BENNETT DENTAL ARTS LLC JEFFERY D BENNETT 3123 E JOHN ADAMS PKWY IDAHO FALLS ID 83406 USA		JEFFERY D BENNETT 3123 E JOHN ADAMS PKWY IDAHO FALLS ID 83406			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name JEFFERY D BENNETT	Street or PO Address 3123 E. JOHN ADAMS PKWY.		City IDAHO FALLS	State ID	Country USA	Postal Code 83406
5. Organized Under the Laws of: ID W 95853		6. Annual Report must be signed.* Signature: Jeffery D. Bennett Name (type or print): Jeffery D. Bennett Date: 06/14/2012 Title: Owner					
Processed 06/14/2012 * Electronically provided signatures are accepted as original signatures.							