No. <b>W 109855</b>		Due no later than Jan 31, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		TOM DAVIES			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  TOM DAVIES, D.D.S., PLLC  TOM DAVIES  3688 WRENCO LP RD  SANDPOINT ID 83864		3688 WRENCO LP RD SANDPOINT 83864  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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 LISA D DAVIES		IES :	3688 Wrenco Loop Road	SANDPOINT	ID	USA	83864
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Tom Davies		Date: 11/23/2014			
W 109855		Name (type or print): Tom Davies		Title: Manager			
Processed 11/23/2014 * Electronically provided signatures are accepted as original signatures.							