No. <b>W 26594</b> Return to:		Due no later than Oct 31, 2012 Annual Report Form			2. Registered Agent and Address (NO PO BOX)  GREGORY C CALDER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  BBM DENTAL PLLC JUSTIN D BELL 2205 CHANNING WAY STE A		IDAHO FALLS	2105 CORONADO ST IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		IDAHO FALLS ID 83402 USA						
4. Limited Liability Compan	ies: Enter Nar	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MANAGER	JUSTIN BELL DDS WAYNE MURDOCK DDS		2205 CHANNING WAY 2205 CHANNING WAY	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83404 83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 26594		Signature: Justin D Bell			Date: 09/05/2012			
		Name (type or print): Justin D Bell			Title: Manager			
Processed 09/05/2012	* Electronically provided signatures are accepted as original signatures.							