No. <b>W 117647</b>	Du	2. Registered /	2. Registered Agent and Address (NO PO BOX)				
Return to:	Annual Report Form			QUINN BROWN 1175 E PARKCENTER BLVD STE 101 BOISE ID 83706  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.  RIVERVIEW DENTAL PLLC  QUINN BROWN  1175 E PARKCENTER BLVD STE 101  BOISE ID 83706  USA		N. 17 CHICAGO N. 17 CHICA				
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registe				
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 QUINN ALLE	N BROWN	2407 S MAIRNER WAY	BOISE	ID	USA	83706	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: Qu	uinn Brown		Date: 07/30/2018			
W 117647	Name (type or print): Quinn Brown			Title: Member			
Processed 07/30/2018	* Electronically provided signatures are accepted as original signatures.						