

No. W 55391

Due no later than October 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:
SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

SMF-2, LLC
140 E BOISE AVE
BOISE, ID 83706MICHAEL J FLORENCE DMD
140 E BOISE AVE
BOISE, ID 83706NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Managers.

Office held	Name	Street or P.O. Address	City	State	Zip
MANAGER	MICHAEL J. FLORENCE	140 E. BOISE AVE	BOISE	ID	83706
MANAGER	SHARON FLORENCE	140 E BOISE AVE	BOISE	ID	83706

5. Organized Under the Laws of:

IDAHO
W 55391

6.

Signature

Date

8-15-08

Name (Typed or Printed)

MICHAEL J. FLORENCE

Title

MANAGER

Issued 08/06/2008

Do Not Tape or Staple

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