

No. <b>W 139341</b>		<b>Due no later than Jun 30, 2016</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  WEST VALLEY ENDODONTICS LLC BRENT CHAPMAN 1217 JACOB ALCOTT WAY NAMPA ID 83687		ROBERT C MONTGOMERY CHTD 2160 S TWIN RAPID BOISE ID 83709			
				3. <u>New</u> Registered Agent Signature:*			
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	BRUCE EDWARD NEWCOMB	1217 JACOB ALCOTT WAY	NAMPA	ID	USA	83687	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 139341</b>		Signature: Bruce E Newcomb				Date: 04/28/2016	
		Name (type or print): Bruce E Newcomb				Title: Member	
Processed 04/28/2016		* Electronically provided signatures are accepted as original signatures.					