No. W 147521		Due no later than Feb 28, 2017 2. Registered Agent and Address (NO PO B				PO BOX)
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. SAWTOOTH DENTAL, PLLC 139 RIVER VISTA PL STE 202 TWIN FALLS ID 83301	139 RIVER Y	SCOTT HUNSAKER 139 RIVER VISTA PL STE 202 TWIN FALLS ID 83301-8330 3. New Registered Agent Signature:*		
4. Limited Liability Companies: Enter Nar Office Held Name		mes and Addresses of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code
MEMBER ERIC THOM/		AS 139 RIVER VISTA PLACE SUITE 20	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID W 147521		6. Annual Report must be signed.* Signature: Scott Hunsaker Name (type or print): Scott Hunsaker		Date: 12/22/2016 Title: Accountant		
Processed 12/22/2016		* Electronically provided signatures are accepted as original signatures.				