

No. W 60687		Due no later than Mar 31, 2016		2. Registered Agent and Address (NO 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		BRETT DEAN JACOBSON 2760 HONEYSUCKLE RD IDAHO FALLS ID 83402	
		1. Mailing Address: Correct in this box if needed. ASSIST TO SUCCEED IDAHO FALLS, LLC BRETT D JACOBSON 885 PANCHERI DRIVE IDAHO FALLS ID 83402		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
MANAGER	BRETT DEAN JACOBSON DDS	2760 HONEYSUCKLE RD	IDAHO FALLS	ID	83402
MANAGER	JAMES GARL DRAKE DMD	1763 PEGGYS LN	IDAHO FALLS	ID	83402
5. Organized Under the Laws of: ID W 60687		6. Annual Report must be signed.* Signature: Brett Jacobson Name (type or print): Brett Jacobson Date: 01/28/2016 Title: Partner			
Processed 01/28/2016		* Electronically provided signatures are accepted as original signatures.			