

No. W 82044		Due no later than Mar 31, 2013		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 1. Mailing Address: Correct in this box if needed. ROARKE J. MILLER, DMD, PLLC ROARKE J MILLER 2811 12TH AVE RD NAMPA ID 83686		ROARKE J MILLER, DMD 2811 12TH AVE RD NAMPA ID 83686			
				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	ROARKE J MILLER	12295 LANDAU WAY	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 82044		Signature: Roarke Miller				Date: 01/16/2013	
		Name (type or print): Roarke Miller				Title: Managing Member	
Processed 01/16/2013		* Electronically provided signatures are accepted as original signatures.					