No. W 77403		Due no later than Sep 30, 2016		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ROBSON LLC JAMES A ROBSON DMD 9787 N COUNTRY CLUB DR HAYDEN ID 83835		9787 N COUN HAYDEN ID	JAMES A ROBSON DMD 9787 N COUNTRY CLUB DR HAYDEN ID 83835 3. New Registered Agent Signature:*			
NO FILIN RECEIVED BY 4. Limited Liability Co	DUE DATE	mes and Address	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	JAMES A R	OBSON	1683 E. MILES AVE	HAYDEN LAKE	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 77403		Signature: Ja	ames A. Robson, DMD		Date: 07/27/2016			
		Name (type or print): James A. Robson, DMD Title:			e: owner			
Processed 07/27/201	.6	* Electronically	provided signatures are accepted as origina	l signatures.				