

No. W 12581		Due no later than Aug 31, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KELLY E. CARLEN, DDS, PLLC KELLY CARLEN 730 MEGAN CT NAMPA ID 83686-8735		KELLY CARLEN 730 MEGAN CT NAMPA ID 83686			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name SHAWNA D CARLEN	Street or PO Address 730 MEGAN COURT		City NAMPA	State ID	Country USA	Postal Code 83686
5. Organized Under the Laws of: ID W 12581		6. Annual Report must be signed.* Signature: Kelly E Carlen Name (type or print): Kelly E Carlen Date: 07/21/2010 Title: Owner					
Processed 07/21/2010 * Electronically provided signatures are accepted as original signatures.							