

No. W 25461		Due no later than Aug 31, 2013 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. MICHAEL C. SIMMS, D.D.S., PLLC MICHAEL C SIMMS 4700 N CLOVERDALE RD BOISE ID 83713 USA		MICHAEL C SIMMS 4700 N CLOVERDALE STE 104 BOISE ID 83713			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MICHAEL C SIMMS	4700 N. CLOVERDALE ROAD	BOISE	ID	USA	83713	
5. Organized Under the Laws of: ID W 25461		6. Annual Report must be signed.* Signature: Michael C. Simms Name (type or print): Michael C. Simms					
		Date: 08/27/2013 Title: Owner					
Processed 08/27/2013 * Electronically provided signatures are accepted as original signatures.							