

No. C 204814	Due no later than Jan 31, 2016 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CHASE A. FUNK DDS PA CHASE FUNK 139 RIVER VISTA PL STE 202 TWIN FALLS ID 83301	SCOTT HUNSAKER 139 RIVER VISTA PL STE 202 TWIN FALLS ID 83301-8330 3. <u>New</u> Registered Agent Signature: *				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	CHASE FUNK	139 RIVER VISTA PLACE SUITE 20	TWIN FALLS	ID	USA	83301
5. Organized Under the Laws of: ID C 204814	6. Annual Report must be signed.* Signature: Scott Hunsaker Name (type or print): Scott Hunsaker		Date: 11/23/2015 Title: Accountant			
Processed 11/23/2015		* Electronically provided signatures are accepted as original signatures.				