

No. W 125682		Due no later than May 31, 2015 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. LED PEDIATRIC DENTISTRY PLLC CORDELL DENTON NEBEKER 10439 FALLOW FIELD STREET NAMPA ID 83687-5156		UNITED STATES CORPORATION AGEN 950 BANNOCK ST STE 1100 BOISE ID 83702			
				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	
MANAGER	CORDELL DENTON NEBEKER	10439 FALLOW FIELD STREET	NAMPA	ID	USA	83687-5156	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 125682		Signature: Cordell D Nebeker				Date: 06/29/2015	
		Name (type or print): Cordell D Nebeker				Title: Manager	
Processed 06/29/2015		* Electronically provided signatures are accepted as original signatures.					