

No. W 117470		Due no later than Sep 30, 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. DMD, LLC 245 INDIAN CREEK RD HAILEY ID 83333		DONNA D'ADAMO 245 INDIAN CREEK RD HAILEY ID 83333			
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 MANAGER	Name DONNA D'ADAMO	Street or PO Address 245 INDIAN CREEK		City HAILEY	State ID	Country USA	Postal Code 83333
5. Organized Under the Laws of: ID W 117470		6. Annual Report must be signed.* Signature: Donna D'Adamo Name (type or print): Donna D'Adamo Date: 09/19/2013 Title: Manager					
Processed 09/19/2013 * Electronically provided signatures are accepted as original signatures.							