

No. W 77414		Due no later than Sep 30, 2009		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. BRYCE LARSEN, DMD, PLLC BRYCE LARSEN 950 HOSPITAL WAY STE B POCATELLO ID 83201 USA		DAVE BAGLEY 201 E CENTER ST POCATELLO ID 83201			
				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	BRYCE R LARSEN	950 HOSPITAL WAY, STE B	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 77414		Signature: Angelene Larsen				Date: 08/25/2009	
		Name (type or print): Angelene Larsen				Title: Bookkeeper	
Processed 08/25/2009		* Electronically provided signatures are accepted as original signatures.					