No. W 60398		Due no later than Mar 31, 2009		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ROCKY MOUNTAIN SMILE RENOVATION, LLC DENEE M MOREHOUSE 860 N TRAQUAIR PL MERIDIAN ID 83642		860 N TRAQI	DENEE M MOREHOUSE 860 N TRAQUAIR PL MERIDIAN ID 83642 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	DENEE M M	IOREHOUSE	860 N TRAQUAIR PL	MERIDIAN	ID	USA	83642	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 60398		Signature: DeN		Date: 04/06/2009				
		Name (type or		Title: Owner				
Processed 04/06/2009 * Electronically provided signatures are accepted as original signatures.								