

No. W 38985		Due no later than May 31, 2017		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. KENT B. SIMMONS D.D.S., PLLC KENT B SIMMONS 3318 4TH STREET LEWISTON ID 83501		CADE KONEN 315 S ALMON MOSCOW ID 83843	
				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	KENT B SIMMONS	7028 COUGAR RIDGE DRIVE	LEWISTON	ID	83501
5. Organized Under the Laws of: ID W 38985		6. Annual Report must be signed.* Signature: Kent Simmons Name (type or print): Kent Simmons Date: 05/16/2017 Title: Manager			
Processed 05/16/2017		* Electronically provided signatures are accepted as original signatures.			