

No. W 178939		Due no later than Feb 28, 2018 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. RADIANT DENTAL, PLLC SCHUYLER B SESSIONS DDS 118 S HIDDEN VALLEY RD REXBURG ID 83440		SCHUYLER B SESSIONS DDS 118 S HIDDEN VALLEY RD REXBURG ID 83440			
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 SCHUYLER B SESSIONS	Street or PO Address 118 S HIDDEN VALLEY RD		City REXBURG	State ID	Country USA	Postal Code 83440
5. Organized Under the Laws of: ID W 178939		6. Annual Report must be signed.* Signature: Schuyler B. Sessions Name (type or print): Schuyler B. Sessions Date: 03/17/2018 Title: Owner					
Processed 03/17/2018 * Electronically provided signatures are accepted as original signatures.							