

No. <b>W 147673</b>		<b>Due no later than Feb 28, 2017</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  STUCKI DENTAL SERVICE LLC KEITH STUCKI 524 E. FUJII DR NAMPA ID 83686		KEITH STUCKI 524 E FUJII DR NAMPA ID 83686			
				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	
MEMBER	KEITH STUCKI	524 E FUJII DR	NAMPA	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 147673</b>		Signature: Keith Stucki				Date: 01/17/2017	
		Name (type or print): Keith Stucki				Title: Member	
Processed 01/17/2017		* Electronically provided signatures are accepted as original signatures.					