







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney REINSTATEMENT ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$30.00 For Office Use Only

-FILED-

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| Deiretetement Annual Depart Form | | | |
|---|---------|--|---|
| Reinstatement Annual Report Form Select one: Standard, Expedited or Same Day Service (see descriptions below) | | Same Day Service (+\$100; filling fee \$130) | |
| Current Entity Name | | PAVENTY HARRISON DENTAL LLC | |
| The file number of this entity on the records of the Idaho Secretary of State is: | | 0000574563 | |
| Organized under the laws of: | | IDAHO | |
| Entity Type: | | Limited Liability Company (D) | |
| Entity Subtype: Limited Liability Company Subtype | | Limite | d Liability Company |
| Limited Liability Company Name: Limited Liability Company name | | PAVENTY HARRISON DENTAL LLC | |
| The registered agent on record is: Registered Agent | | TIMOTHY PAVENTY Registered Agent Physical Address 2230 N VIZCAYA WAY EAGLE, ID 83616 Mailing Address | |
| The mailing address of the corporation is: 2230 N VIZCAYA WAY EAGLE, ID 83616-5434 | | | |
| Limited Liability Company Managers and Members | | | |
| Name | TItle | | Address |
| ★ Timothy C Paventy | Member | | ZOLA 2230 N VIZCAYA WAY EAGLE, ID 83616 |
| The Application for Reinstatement must be signed by at least one gov Job Title: | /ernor. | Manag | ger |
| Timothy Paventy | | | 01/19/2021 |
| Sign Here | | | Date |