No. <b>W 91525</b>		Due no later than Mar 31, 2017	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHELE HARRIS			
SECRETARY OF STATE	1. Mailin	1. Mailing Address: Correct in this box if needed.  WORDS OF WISDOM COUNSELING CENTER LLC MICHELE HARRIS 14133 W ROCHESTER DR BOISE ID 83713-0731		14133 W ROCHESTER DR BOISE ID 83713-0731			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	MICHELE						
	BOISE ID			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: En	er Names and Addre	esses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MICHE	LE HARRIS	14133 W ROCHESTER DR	BOISE	ID	USA	83713-0731	
5. Organized Under the Laws of:	6. Annual Re	eport must be signed.*					
ID	Signature	Signature: Michele Harris		Date: 05/06/2017			
W 91525	Name (typ	Name (type or print): Michele Harris Title: LCPC/Sole Proprietor					
Processed 05/06/2017	* Electronical	* Electronically provided signatures are accepted as original signatures.					