

No. <b>W 89121</b>		Due no later than Dec 31, 2014		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> HOLLIS MENTAL HEALTH SERVICES LLC NELA J HOLLIS 620 S IDAHO AVE FRUITLAND ID 83619 USA		NELA J HOLLIS 620 S IDAHO AVE FRUITLAND 83619			
				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	NELA J HOLLIS	620 S IDAHO AVE	FRUITLAND	ID	USA	83619	
5. Organized Under the Laws of:  <b>ID W 89121</b>		6. Annual Report must be signed.* Signature: Nela J Hollis Name (type or print): Nela J Hollis Date: 10/28/2014 Title: Owner					
Processed 10/28/2014		* Electronically provided signatures are accepted as original signatures.					