No. W 26031		Due no later than Sep 30, 2015			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SHIRLENE ELLEDGE				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. ADLERIAN RELATIONSHIP CENTER L.C. SHIRLENE M. ELLEDGE 4210 EDWARDS ST BOISE ID 83703			4210 EDWARDS ST BOISE ID 83703 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held Nam	ne		Street or PO Address		City	State	Country	Postal Code
MANAGER SHIRLENE ELI		LEDGE	4210 EDWARDS ST		BOISE	ID		83703
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Shirlene Elledge			Date: 10/06/2015			
W 26031		Name (type or print): Shirlene Elledge			Title: Director			
Processed 10/06/2015	* Electronically provided signatures are accepted as original signatures.							