No. W 100243	D	Due no later than Feb 28, 2015			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ARROWROCK MAUREEN CL 6126 W STAT	Annual Report Form 1. Mailing Address: Correct in this box if needed. ARROWROCK COUNSELING AND CONSULTING, LLC MAUREEN CLAHAN 6126 W STATE ST STE 109 BOISE ID 83703		BEVIN MODRAK 6126 W. STATE ST. STE 109 BOISE 83703-2741 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE			0. <u></u> 1.egis.					
The same of the contract of th	nter Names and Address	es of at least one Member or Manager.						
Office Held Name)	Street or PO Address	City	State	Country	Postal Code		
	REEN J CLAHAN I E MODRAK	6126 W. STATE ST STE 109 6126 W. STATE ST. SUITE 109	BOISE BOISE	ID ID	USA USA	83703 83703-2741		
5. Organized Under the Laws of:	6. Annual Repor	6. Annual Report must be signed.*						
ID W 100243		Signature: MAUREEN CLAHAN Name (type or print): MAUREEN CLAHAN		Date: 01/05/2015 Title: OWNER				
Processed 01/05/2015	* Electronically provided signatures are accepted as original signatures.							