No. W 93363		Due no later than May 31, 2014			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		BRUCE E POE 242 N 8TH ST STE 210 BOISE ID 83702				
SECRETARY OF STATE		1. Mailing Address: Correct in this box if needed.						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		BRUCE E POE	ITECTURE COLLABORATIVE PLLC E RIDGE POINT WAY		BOISE ID 63/02			
		BOISE ID 83712 USA			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 BRUCE E. POE		2034 SOUTH RIDGE POINT WAY		BOISE	ID	USA	83712	
5. Organized Under the Laws o	of:	6. Annual Report must be signed.*						
ID W 93363		Signature: Bruce Poe			Date: 03/30/2014			
		Name (type or print): Bruce Poe			Title: President			
Processed 03/30/2014 * Electronically provided signatures are accepted as original signatures.								