

No. <b>W 152983</b>		<b>Due no later than Jun 30, 2017</b>		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> PLAY LEARN GROW, PLLC CHRISTINA SEARS 9631 N CIRCLE DR HAYDEN ID 83835		CHRISTINA SEARS 9631 N CIRCLE DR HAYDEN ID 83835			
				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	CHRISTINA SEARS	9631 N CIRCLE DR	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 152983</b>		Signature: Christina Sears				Date: 07/15/2017	
		Name (type or print): Christina Sears				Title: Occupational Therapist	
Processed 07/15/2017		* Electronically provided signatures are accepted as original signatures.					