

No. W 75003		Due no later than Jun 30, 2015		2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. PERIWINKLE CHILDREN'S THERAPY LLC MICHELLE COPPESS 1397 BIZTOWN LP HAYDEN ID 83835		MICHELLE COPPESS 1397 BIZTOWN LP 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
MEMBER	MICHELLE COPPESS	5871 N COLFAX ST	DALTON GARDENS	ID	83815
MEMBER	CHRISTY ADAMS	9109 N TORREY LN	HAYDEN	ID	83835
5. Organized Under the Laws of: ID W 75003		6. Annual Report must be signed.* Signature: Michelle C Coppess Name (type or print): Michelle C Coppess Date: 04/21/2015 Title: Owner			
Processed 04/21/2015		* Electronically provided signatures are accepted as original signatures.			