No. <b>W 85108</b> Return to:		Due no later than Jul 31, 2010 Annual Report Form		_	2. Registered Agent and Address (NO PO BOX)  LAURA MCCARTHY			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SPEECH SPOT LLC LAURA MCCARTHY  4810 GROVER ST  BOISE ID 83705 USA		d	4810 GROVER ST BOISE ID 83705  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	mes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	C	ity	State	Country	Postal Code
MEMBER LAURA J MO		CCARTHY	4810 GROVER STREET	В	DISE	ID	USA	83705
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Laura McCarthy		Dat	Date: 06/15/2010			
W 85108		Name (type or print): Laura McCarthy		Title	Title: Speech-Language Pathologist			
Processed 06/15/2010 * Electronically provided signatures are accepted as original signatures.								