

No. <b>W 124714</b>		<b>Due no later than Apr 30, 2015</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  BURKS COUNSELING PLLC MICHELLE BURKS 5426 W HILL RD BOISE ID 83703 USA		MICHELLE M BURKS 5426 W HILL RD BOISE 83703			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name MICHELLE BURKS	Street or PO Address 5426 W. HILL ROAD		City BOISE	State ID	Country USA	Postal Code 83703
5. Organized Under the Laws of:  <b>ID</b> <b>W 124714</b>		6. Annual Report must be signed.*  Signature: Michelle Burks Name (type or print): Michelle Burks  Date: 02/25/2015 Title: Manager					
Processed 02/25/2015 * Electronically provided signatures are accepted as original signatures.							