

No. W 96155		Due no later than Sep 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		Annual Report Form		NANCY S INABA 3224 WHITMAN DR BOISE ID 83716			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		NANCY INABA, OCCUPATIONAL THERAPIST, LLC. NANCY S INABA 3224 WHITMAN DR BOISE ID 83716 USA					
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	GEORGE A ARAGON	3224 WHITMAN DR	BOISE	ID	USA	83716	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 96155		Signature: Nancy Inaba		Date: 08/06/2015			
		Name (type or print): Nancy Inaba		Title: Occupational Therapist			
Processed 08/06/2015		* Electronically provided signatures are accepted as original signatures.					