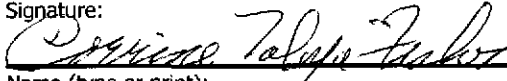
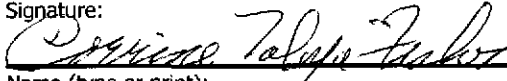
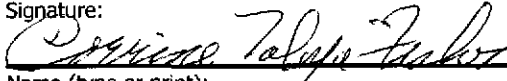


No. W 170085	Due no later than Aug 31, 2017 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX)																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE			1. Mailing Address: Correct in this box if needed. TAFOYA-FISHER BEHAVIORAL HEALTH LLC CORRINE TAFOYA-FISHER 16 12TH AVE SO STE 201 NAMPA ID 83651	CORRINE TAFOYA-FISHER 16 12TH AVE SO STE 201 NAMPA ID 83651 3. <u>New</u> Registered Agent Signature.																																		
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1"> <thead> <tr> <th>Manager or Member</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>Corrine Tafoya Fisher</td> <td>16 12th Ave So</td> <td>Nampa</td> <td>ID</td> <td>USA</td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Corrine Tafoya Fisher	16 12th Ave So	Nampa	ID	USA		Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	Corrine Tafoya Fisher	16 12th Ave So	Nampa	ID	USA																																	
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: IDAHO W 170085	6. <table border="1"> <tr> <td>Signature: </td> <td>Date: <u>6-19-17</u></td> </tr> <tr> <td>Name (type or print): <u>Corrine Tafoya Fisher</u></td> <td>Title: <u>Owner</u></td> </tr> </table>			Signature: 	Date: <u>6-19-17</u>	Name (type or print): <u>Corrine Tafoya Fisher</u>	Title: <u>Owner</u>																															
Signature: 	Date: <u>6-19-17</u>																																					
Name (type or print): <u>Corrine Tafoya Fisher</u>	Title: <u>Owner</u>																																					
Issued 06/19/2017 by online		113442																																				