

No. W 43328		Due no later than Oct 31, 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 1. Mailing Address: Correct in this box if needed. RECOVERY PARTNERS, LLC AMANDA DEGRAFF CORNERSTONE SUPPORT INC 70 MANSELL COURT, SUITE 250 ROSWELL GA 30076		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
				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	
MANAGER	BENJAMIN D LEWIS	4151 N. MARSHALL WAY, SUITE 12	SCOTTSDALE	AZ	USA	85251	
5. Organized Under the Laws of: AZ W 43328		6. Annual Report must be signed.* Signature: Benjamin Douglas Lewis Name (type or print): Benjamin Douglas Lewis Date: 08/20/2015 Title: President					
Processed 08/20/2015		* Electronically provided signatures are accepted as original signatures.					