No. W 138771		Due no later than Jun 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form 1. Mailing Address: Correct in this box if needed. TERRI JAMES, LCPC LLC TERRI JAMES P.O. BOX 2243 HAILEY ID 83333		TERRI JAMES 221 S. RIVER ST. 2B HAILEY ID 83333-8333 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080							
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Cor	mpanies: Enter Na	mes and Addresses of a	at least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MEMBER	BER TERRI S JAMES		221 S. RIVER ST. 2B P.O. BOX 2243	HAILEY	ID	USA	83333
5. Organized Under the Laws of:		6. Annual Report mus					
ID W 138771		Signature: Terri S James		Date: 05/09/2016			
		Name (type or print	Title: Member				
Processed 05/09/2016	5	* Electronically provide	ed signatures are accepted as original sign	natures.			