

No. W 116278		Due no later than Aug 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PROFESSIONAL DISABILITY ASSOCIATES, LLC JENNIFER LYN PARDI-MCCARTHY ONE MONUMENT SQUARE, STE. 201 PORTLAND ME 04101 USA		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name ALPHONSE A. HEMOND	Street or PO Address ONE MONUMENT SQUARE, STE. 201		City PORTLAND	State ME	Country USA	Postal Code 04101
5. Organized Under the Laws of: ME W 116278		6. Annual Report must be signed.* Signature: Jennifer Pardi-McCarthy Name (type or print): Jennifer Pardi-McCarthy					
Processed 06/27/2014 * Electronically provided signatures are accepted as original signatures.							