

|                                                                                                                                                        |               |                                                                                                                                             |       |                                                    |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------------------|---------|------------------|--|
| No. <b>W 143119</b>                                                                                                                                    |               | <b>Due no later than Oct 31, 2016</b>                                                                                                       |       | 2. Registered Agent and Address <b>(NO PO BOX)</b> |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>1. Mailing Address: Correct in this box if needed.</b><br>NORTHVIEW MONTESSORI, LLC<br>KELLI KENNEDY<br>1302 N 25TH ST<br>BOISE ID 83702 |       | KELLI KENNEDY<br>1302 N 25TH ST<br>BOISE ID 83702  |         |                  |  |
|                                                                                                                                                        |               |                                                                                                                                             |       | 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                                                                                                                                                | KELLI KENNEDY | 1302 N 25TH ST                                                                                                                              | BOISE | ID                                                 | USA     | 83702            |  |
| 5. Organized Under the Laws of:                                                                                                                        |               | 6. Annual Report must be signed.*                                                                                                           |       |                                                    |         |                  |  |
| <b>ID<br/>W 143119</b>                                                                                                                                 |               | Signature: Kelli Kennedy                                                                                                                    |       |                                                    |         | Date: 10/12/2016 |  |
|                                                                                                                                                        |               | Name (type or print): Kelli Kennedy                                                                                                         |       |                                                    |         | Title: Manager   |  |
| Processed 10/12/2016                                                                                                                                   |               | * Electronically provided signatures are accepted as original signatures.                                                                   |       |                                                    |         |                  |  |