

No. W 118856		Due no later than Nov 30, 2016 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. PSYCHIATRIC SERVICES OF SOUTHEAST IDAHO L.L.C JDEE RYAN WILSON 2440 MINIDOKA ST POCATELLO ID 83201		J'DEE RYAN WILSON 2440 MINIDOKA ST POCATELLO ID 83201-8320			
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	Name	Street or PO Address		City	State	Country	Postal Code
MANAGER	JDEE RYAN WILSON	2440 MINIDOKA ST		POCATELLO	ID	USA	83201
5. Organized Under the Laws of: ID W 118856		6. Annual Report must be signed.* Signature: J'Dee R. Wilson Name (type or print): J'Dee R. Wilson Date: 09/28/2016 Title: Business Owner					
Processed 09/28/2016 * Electronically provided signatures are accepted as original signatures.							