

No. W 117999	Due no later than Oct 31, 2013 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. CLINICAL NEUROSCIENCE MANAGEMENT PLLC KENNETH MICHAEL LITTLE 2023 CLAREMONT DRIVE BOISE ID 83702 USA		GIVENS PURSLEY CORPORATE SERVICES 601 W BANNOCK ST 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
MEMBER	KENNETH MICHAEL LITTLE	2023 CLAREMONT DRIVE	BOISE	ID	USA	83702
5. Organized Under the Laws of: ID W 117999	6. Annual Report must be signed.* Signature: Kenneth M. Little Name (type or print): Kenneth M. Little		Date: 08/15/2013 Title: Md			
Processed 08/15/2013		* Electronically provided signatures are accepted as original signatures.				