No. W 123507		e no later than Mar 31, 2016	2. Registered A	Agent and Ad	dress (NO F	PO BOX)	
Return to:	Annual Report Form			MICHAEL L STEVENS 4766 WEST OLD HWY 91 INKOM ID 83245 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. MICHAEL L. STEVENS, LCSW LLC MICHAEL L. STEVENS 4766 WEST OLD HWY 91 INKOM ID 83245		INKOM ID				
NO FILING FEE IF RECEIVED BY DUE DATE	1						
4. Limited Liability Companies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER ANGELA R STEVENS 4766 WEST OLD HWY		4766 WEST OLD HWY 91	INKOM	ID	USA	83245	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID Signature: Michael L. Stevens			Date: 02/23/2016				
W 123507	Name (type or		Title: Owner				
Processed 02/23/2016	* Electronically provided signatures are accepted as original signatures.						