No. <b>W 100085</b> Return to:		Due no later than Feb 28, 2015 Annual Report Form  1. Mailing Address: Correct in this box if needed.  KELLY VICTORINE, L.L.C.  KELLY J VICTORINE  1650 S TOPAZ WAY  MERIDIAN ID 83642			2. Registered Agent and Address (NO PO BOX)  KELLY VICTORINE 1650 S. TOPAZ WAY MERIDIAN 83642  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				MERIDIAN				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	nies: Enter Na	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	KELLY J VICTORINE		11355 W. HAZELWOOD DR.	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kelly Victorine			Date: 12/17/2014			
W 100085		Name (type or print): Kelly Victorine			Title: LCSW			
Processed 12/17/2014 * Electronically provided signatures are accepted as original signatures.								