

No. W 84705	Due no later than Jun 30, 2014 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. ADAMS CENTER FOR COUNSELING, PLLC JYL E ADAMS 2525 N STOKESBERRY PLACE SUITE A MERIDIAN ID 83646 USA		RANDALL W ADAMS 596 W OAKHAMPTON DRIVE EAGLE ID 83616			
			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	JYL E ADAMS	596 W OAKHAMPTON DRIVE	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 84705		6. Annual Report must be signed.* Signature: Jyl Adams Name (type or print): Jyl Adams Date: 04/16/2014 Title: Sole Member				
Processed 04/16/2014		* Electronically provided signatures are accepted as original signatures.				