No. <b>W 26527</b>		Due no later than Oct 31, 2018			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ROBERT C ENGLE PHD 380 E. PARKCENTER BLVD SUITE 210 BOISE ID 83706-3964			
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.						
		ROBERT C. ENGLE, PH.D., P.L.L.C. ROBERT C ENGLE, PH.D,PLLC 380 E. PARKCENTER BLVD						
		SUITE 210		3. New Registered Agent Signature:*				
		BOISE ID 83706-3964 USA						
4. Limited Liability Compan	ies: Enter Na	mes and Addresses of	of at least one Member or Manage	er.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	ROBERT C	ENGLE PH.D.	380 E. PARKCENTER BLVD.	SUITE 210	BOISE	ID	USA	83706
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 26527		Signature: Robert C. Engle, Ph. D.			Date: 09/02/2018			
		Name (type or print): Robert C. Engle, Ph. D.			Title: Sr. Managing Member			
Processed 09/02/2018 * Electronically provided signatures are accepted as original signatures.								