

No. W 50490		Due no later than May 31, 2012 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. CARLA JENSEN, PH.D., P.L.L.C. CARLA JENSEN, PH.D 198 S OLD QUARRY WAY BOISE ID 83709 USA		CARLA JENSEN 198 S OLD QUARRY WAY BOISE ID 83709			
				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	
MANAGER	CARLA JENSEN	3101 W MAIN STREET STE 207	BOISE	ID	USA	83702	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 50490		Signature: Carla Jensen Phd				Date: 04/27/2012	
		Name (type or print): Carla Jensen Phd				Title: Manager	
Processed 04/27/2012		* Electronically provided signatures are accepted as original signatures.					