No. **W 25244**	**Due no later than Jul 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.** PHYLLIS BOYSEN, MA, CCC-SLP, LLC PHYLLIS BOYSEN 6368 N PORTSMOUTH AVE BOISE ID 83714	PHYLLIS BOYSEN 6368 N PORTSMOUTH AVE BOISE ID 83714 3. New 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	PHYLLIS BOYSEN	6368 N PORTSMOUTH AVE	BOISE	ID	USA	83714

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 25244**	Signature: Phyllis Boysen	Date: 05/10/2012
	Name (type or print): Phyllis Boysen	Title: Member/Owner

Processed 05/10/2012

* Electronically provided signatures are accepted as original signatures.