No. W 96492		Due no later than Sep 30, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. COBY TEFFT, LMFT, LLC COBY JON TEFFT 503 HILLVIEW DR BOISE ID 83712		503 HILLVI BOISE ID	COBY TEFFT 503 HILLVIEW DR BOISE ID 83712 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of a	t least one Member or Manager					
Office Held	Name	nes and nadi esses of a	Street or PO Address	City	State	Country	Postal Code	
MANAGER	ANAGER COBY JON TEFFT		503 HILLIVEW DR	BOISE	ID	USA	83712	
5. Organized Under the Laws of: ID W 96492		6. Annual Report must be signed.* Signature: Coby Tefft Name (type or print): Coby Tefft			Date: 07/23/2014 Title: Manager			
Processed 07/23/2014 * Electronically provided signatures are accepted as original signatures.								