

No. W 153385		Due no later than Jun 30, 2017 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		1. Mailing Address: Correct in this box if needed. RAGAN SLP GROUP LLC CASEY RAGAN 4685 BLACKSTONE DRIVE IDAHO FALLS ID 83404		CASEY RAGAN 4685 BLACKSTONE DRIVE IDAHO FALLS ID 83404			
NO FILING FEE IF RECEIVED BY DUE DATE				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 MANAGER	BRANDI LYNN RAGAN CASEY JAMES RAGAN	4685 BLACKSTONE DRIVE 4685 BLACKSTONE DRIVE	IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83404 83404	
5. Organized Under the Laws of: ID W 153385		6. Annual Report must be signed.* Signature: Casey Ragan Name (type or print): Casey Ragan Date: 06/12/2017 Title: Speech and Language Pathologis					
Processed 06/12/2017 * Electronically provided signatures are accepted as original signatures.							