

No. <b>W 75973</b>		<b>Due no later than Jul 31, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> SILVER CREEK FORENSIC AND CLINICAL PSYCHOLOGY, PLLC BILL R ARNOLD PHD ABPP 2770 E FRANKLIN RD MERIDIAN ID 83642		BILL R ARNOLD PHD ABPP 2770 E FRANKLIN RD MERIDIAN ID 83642			
				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	BILL R ARNOLD	873 WEST QUARTER DRIVE	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 75973</b>		Signature: Bill R Arnold				Date: 05/14/2012	
		Name (type or print): Bill R Arnold				Title: SOLE Owner	
Processed 05/14/2012		* Electronically provided signatures are accepted as original signatures.					