

No. W 138213	Due no later than May 31, 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		KATHRYN E DAHLSTROM 1241 CREEKSIDE DR HAILEY ID 83333			
	KD SCHOOL PSYCHOLOGY LLC KATHRYN E DAHLSTROM 1241 CREEKSIDE DR HAILEY ID 83333		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	KATHRYN E. DAHLSTROM	1241 CREEKSIDE DR	HAILEY	ID	USA	83333
5. Organized Under the Laws of: ID W 138213		6. Annual Report must be signed.* Signature: Kathryn Dahlstrom Name (type or print): Kathryn Dahlstrom		Date: 06/08/2017 Title: owner		
Processed 06/08/2017		* Electronically provided signatures are accepted as original signatures.				