

No. W 143171	Due no later than Oct 31, 2015 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. PROFESSIONAL COUNSELING AND RECOVERY SUPPORT, LLC ANNE MALLORY 2186 6TH AVE S PAYETTE ID 83661		ANNE MALLORY, LPC, ACADC 2186 6TH AVE S PAYETTE ID 83661				
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 MANAGER	Name ANNE M MALLORY	Street or PO Address 2186 6TH AVE S	City PAYETTE	State ID	Country USA	Postal Code 83661	
5. Organized Under the Laws of: ID W 143171	6. Annual Report must be signed.* Signature: Anne M. Mallory Name (type or print): Anne M. Mallory						Date: 10/29/2015 Title: Owner
Processed 10/29/2015	* Electronically provided signatures are accepted as original signatures.						