

No. W 93082		Due no later than May 31, 2015		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. MUSIC THERAPY OF IDAHO, LLC STEPHANIE L LEAVELL P.O. BOX 8506 BOISE ID 83707 USA		STEPHANIE L JOHNSON 5647 N. HERTFORD WAY BOISE 83714			
				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	STEPHANIE E LEAVELL	5461 N HICKORY BURR PL	BOISE	ID	USA	83713	
MANAGER	KERRY E LEAVELL	P.O. BOX 8506	BOISE	ID	USA	83707-1031	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 93082		Signature: Stephanie Leavell				Date: 04/10/2015	
		Name (type or print): Stephanie Leavell				Title: Manager	
Processed 04/10/2015		* Electronically provided signatures are accepted as original signatures.					