No. <b>W 138145</b>		Due no later than May 31, 2015		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			ALANE F WATKINS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  NORTHWEST ASSESSMENT SERVICES, LLC.  ALANE F WATKINS  PO BOX 335  DEARY ID 83823			710 1ST AVE DEARY 83823  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	panies: Enter Na	mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	SHAYNE WA	ATKINS	PO BOX 335		DEARY	ID	USA	83823
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Alane F Watkins			Date: 04/20/2015			
W 138145		Name (type or print): Alane F Watkins			Title: Owner			
Processed 04/20/2015 * Electronically provided signatures are accepted as original signatures.								