No. **W 92040**	**Due no later than Mar 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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** DOTTIE SPENNER, LCPC, LMFT, RN LLC DOTTIE SPENNER 9427 W RIVERSIDE DR BOISE ID 83714 USA	DOTTIE SPENNER 9427 W RIVERSIDE DR BOISE 83714 3. New 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
MEMBER	DOTTIE A SPENNER	9427 W RIVERSIDE DR	BOISE	ID	USA	83714

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 92040**	Signature: Dottie Spenner	Date: 01/16/2015
	Name (type or print): Dottie Spenner	Title: Member

Processed 01/16/2015

* Electronically provided signatures are accepted as original signatures.