No. W 134687		Due no later than Feb 29, 2016		2. Registered Ag	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		Annual Report Form 1. Mailing Address: Correct in this box if needed. PROFESSIONAL PAYEE SERVICES, LLC NANCY HAMPE 4971 E INVERNESS DR POST FALLS ID 83854 mes and Addresses of at least one Member or Manager.		4971 E INVER POST FALLS	NANCY HAMPE 4971 E INVERNESS DR POST FALLS ID 83854 3. New Registered Agent Signature:*			
				J. <u>New</u> Registers				
20 20 2	Name	nes and Addresse	Street or PO Address	City	State	Country	Postal Code	
MEMBER	ROXANNE M KUSLER NANCY L HAMPE		1692 W JUDY K DRIVE 4971 E INVERNESS DR	RATHDRUM POST FALLS	ID ID	USA USA	83858 83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Na		Date: 02/18/2016				
W 134687		Name (type o		Title: Officer				
Processed 02/18/2016 * Electronically provided signatures are accepted as original signatures.								