

No. W 171453	Due no later than Sep 30, 2017 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. HLK SPEECH THERAPY LLC. HAILEY LONG KRIEGER 3025 N LUCINA AVE IDAHO FALLS ID 83401		HAILEY LONG KRIEGER 3025 N LUCINA AVE IDAHO FALLS ID 83401-8340			
			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	MICHAEL TYSON KRIEGER	3025 N LUCINA AVE	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of: ID W 171453	6. Annual Report must be signed.* Signature: Hailey Long Krieger Name (type or print): Hailey Long Krieger		Date: 09/18/2017 Title: President			
Processed 09/18/2017		* Electronically provided signatures are accepted as original signatures.				