

No. W 137555	Due no later than May 31, 2016 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. ALTURAS COUNSELING, LLC CHRISTINA MARIE SMITH 2211 W MALAD ST BOISE ID 83705 USA		MICHAEL NEEDHAM 2211 W MALAD ST BOISE ID 83705			
			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	CHRISTINA MARIE SMITH	2211 W. MALAD ST.	BOISE, ID	ID	USA	83705
5. Organized Under the Laws of: ID W 137555	6. Annual Report must be signed.* Signature: Christina Smith, LCSW Name (type or print): Christina Smith, LCSW		Date: 04/25/2016 Title: Clinician/Owner			
Processed 04/25/2016		* Electronically provided signatures are accepted as original signatures.				