

No. <b>W 87458</b>	<b>Due no later than Oct 31, 2014</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> SALUS COUNSELING LLC KARIN LYNN-YAHR WATSON 2945 S GOSHEN WAY BOISE ID 83709 USA		KARIN LYNN YAHR WATSON 2945 S GOSHEN WAY BOISE 83709			
			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	KARIN LYNN YAHR WATSON	2945 S. GOSHEN WAY	BOISE	ID	USA	83709
5. Organized Under the Laws of:  <b>ID W 87458</b>	6. Annual Report must be signed.* Signature: Karin Watson Name (type or print): Karin Watson		Date: 10/09/2014 Title: Owner			
Processed 10/09/2014		* Electronically provided signatures are accepted as original signatures.				