

No. W 94348		Due no later than Jun 30, 2018 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		1. Mailing Address: Correct in this box if needed. MARIELLA L. HOGAN, PH.D., ATR-BC, PLLC MARIELLA L HOGAN, PH.D. 1010 W HAYS STREET BOISE ID 83702-5435		MARIELLA L HOGAN PHD 1010 W HAYS STREET BOISE ID 83702-5435			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name MARIELLA L HOGAN	Street or PO Address 1010 WEST HAYS STREET		City BOISE	State ID	Country USA	Postal Code 83702
5. Organized Under the Laws of: ID W 94348		6. Annual Report must be signed.* Signature: Mariella Hogan Name (type or print): Mariella Hogan Date: 05/30/2018 Title: Owner/Manager					
Processed 05/30/2018 * Electronically provided signatures are accepted as original signatures.							