

No. W 70271		Due no later than Jan 31, 2015		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. PERFORMANCE THERAPY, LLC STEPHANIE LIDDLE 3125 VALENCIA DR IDAHO FALLS ID 83404		STEPHANIE LIDDLE 593 BEULAHS IDAHO FALLS 83401			
				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	STEPHANIE LIDDLE	3125 VALENCIA DR	IDAHO FALLS	ID	USA	82404	
5. Organized Under the Laws of: ID W 70271		6. Annual Report must be signed.* Signature: Stephanie Liddle Name (type or print): Stephanie Liddle			Date: 02/16/2015 Title: Manager		
Processed 02/16/2015		* Electronically provided signatures are accepted as original signatures.					