

No. <b>W 149873</b>	<b>Due no later than Apr 30, 2016</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> KAT BOWEN COUNSELING, PLLC LINDA BOWEN 123 E 44TH ST #A GARDEN CITY ID 83714	LINDA BOWEN 2219 N CURTIS RD BOISE ID 83706	
		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	LINDA KATHELENE BOWEN	2219 N CURTIS RD	BOISE ID USA 83706
5. Organized Under the Laws of:  <b>ID W 149873</b>	6. Annual Report must be signed.* Signature: Linda Kathelene Bowen Name (type or print): Linda Kathelene Bowen		Date: 03/30/2016 Title: owner
Processed 03/30/2016		* Electronically provided signatures are accepted as original signatures.	