

No. W 111353		Due no later than Feb 29, 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. WWW.UPPERCERVICALPRO.COM, LLC. GRAYSON BLOM 5975 W. OVERLAND RD BOISE ID 83709		DR GRAYSON BLOM B.SC., D.C. 5975 W. OVERLAND RD BOISE ID 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	GRAYSON BLOM	722 S. OPAL ST	BOISE	ID	USA	83705	
5. Organized Under the Laws of: ID W 111353		6. Annual Report must be signed.* Signature: Grayson Blom Name (type or print): Grayson Blom Date: 12/21/2015 Title: CEO					
Processed 12/21/2015		* Electronically provided signatures are accepted as original signatures.					