No. W 87481		Due no later than Oct 31, 2013		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			GRANT BAFUS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. RIVER CITY FITNESS, LLC GRANT BAFUS 900 N HWY 41 STE 6 POST FALLS ID 83854		POST FALLS	900 N HWY 41 STE 6 POST FALLS ID 83854 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	oanies: Enter N	lames and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	GER GRANT C BAFUS		900 N HWY 41 STE 6	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Grant Bafus			Date: 10/10/2013			
W 87481		Name (type	or print): Grant Bafus		Title: Owner			
Processed 10/10/2013 * Electronically provided signatures are accepted as original signatures.								