

No. <b>W 71518</b>		<b>Due no later than Feb 28, 2013</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> LAKESIDE HOLISTIC HEALTH, PLLC JERRY L BAILEY II 518 N. 4TH ST. COEUR D ALENE ID 83814		PAMELA S LANGENDERFER 518 N. 4TH ST. COEUR D'ALENE ID 83814			
				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	
MEMBER	PAMELA S LANGENDERFER	520 COEUR D ALENE AVE	COEUR D'ALENE	ID	USA	83814	
MEMBER	JERRY L BAILEY II	520 COEUR D ALENE AVE	COEUR D'ALENE	ID	USA	83814	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 71518</b>		Signature: Jerry L Bailey II				Date: 12/24/2012	
		Name (type or print): Jerry L Bailey II				Title: Owner	
Processed 12/24/2012		* Electronically provided signatures are accepted as original signatures.					