

No. <b>W 148390</b>	<b>Due no later than Feb 28, 2018</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> HELLS CANYON HEALTH AND WELLNESS PHARMACY, LLC CHARLES ANDREW POTTENGER 2034 CRESTVIEW DR CLARKSTON WA 99403		ANDREW POTTENGER 523 THAIN RD LEWISTON ID 83501			
			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	CHARLES ANDREW POTTENGER	2034 CRESTVIEW DRIVE	CLARKSTON	WA	USA	99403
5. Organized Under the Laws of:  <b>ID</b> <b>W 148390</b>	6. Annual Report must be signed.* Signature: Andy Pottenger Name (type or print): Andy Pottenger		Date: 03/15/2018 Title: Manager			
Processed 03/15/2018		* Electronically provided signatures are accepted as original signatures.				