

No. <b>W 154042</b>		<b>Due no later than Jul 31, 2018</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> OPTIMAL HEALTH VENTURES, LLC NOAH B. EDVALSON 11988 W HICKORY DR BOISE ID 83713 USA		DAVID W HOCKMAN EA 1458 S BLUE JAY PL EAGLE ID 83616			
				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	NOAH EDVALSON	11988 W HICKORY DR	BOISE	ID	USA	83713	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 154042</b>		Signature: Noah Edvalson				Date: 05/22/2018	
		Name (type or print): Noah Edvalson				Title: Owner/Manager	
Processed 05/22/2018		* Electronically provided signatures are accepted as original signatures.					