No. <b>W 117364</b> Return to:		Due no later than Sep 30, 2015 Annual Report Form		Registered Agent and Address (NO PO BOX)     CHRISTINE JUE			
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.  WILLOW HAWK HEALING ARTS, LLC S. LORI JOHNSON MICHELLE MARKS CHRIS JUE 3858 N GARDEN CENTER WAY STE 204 BOISE ID 83703 USA		2033 W ANDERSON ST BOISE ID 83702			
				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 S. LORI JOHNSON		HNSON	3858 N GARDEN CENTER WAY SUITE 204	BOISE	ID	USA	83703
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID		Signature: lori Joh	Date: 11/12/2015				
W 117364		Name (type or prir	Title: part owner				
Processed 11/12/2015 * Electronically provided signatures are accepted as original signatures.							