

No. W 39004		Due no later than May 31, 2011		2. Registered Agent and Address (NO PO BOX)			
Return to: 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. CHIROPRACTIC HEALING ARTS CENTER, LLC ANGELA K. GOODW 500 WALNUT ST IDAHO FALLS ID 83402		ANGELA K GOODWIN 500 WALNUT ST IDAHO FALLS ID 83402			
				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	ANGELA K GOODWIN	500 WALNUT STREET	IDAHO FALLS	ID	USA	83402	
5. Organized Under the Laws of: ID W 39004		6. Annual Report must be signed.* Signature: Angela K Goodwin Name (type or print): Angela K Goodwin			Date: 03/22/2011 Title: Owner		
Processed 03/22/2011		* Electronically provided signatures are accepted as original signatures.					