

No. <b>W 125884</b>	<b>Due no later than Jun 30, 2017</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>  WELL MIND, LLC KATHLEEN M CURET 401 MAIN ST SALMON ID 83467	KATHEEN M CURET 401 MAIN ST SALMON ID 83467	
		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	THOMAS S CURET	8 RISING SUN COURT	SALMON ID USA 83467
MEMBER	KATHLEEN M CURET	8 RISING SUN COURT	SALMON ID USA 83467
5. Organized Under the Laws of:  <b>ID W 125884</b>	6. Annual Report must be signed.* Signature: Kathleen M Curet Name (type or print): Kathleen M Curet Date: 05/01/2017 Title: member		
Processed 05/01/2017		* Electronically provided signatures are accepted as original signatures.	