

No. W 33418		Due no later than Sep 30, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. INTERNATIONAL INSTITUTE OF NATURAL WELLNESS EDUCATION, LLC 345 WINDY RIVER RD. GARDEN VALLEY ID 83622		MATTHEW HOLLIST 345 WINDY RIVER RD. GARDEN VALLEY ID 83622			
NO FILING FEE IF RECEIVED BY DUE DATE				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	DEONNA MARIE HOLLIST	345 WINDY RIVER RD.		GARDEN VALLEY	ID	83622	
MEMBER	MATTHEW TALMAGE HOLLIST	345 WINDY RIVER RD.		GARDEN VALLEY	ID	USA	83622
5. Organized Under the Laws of: ID W 33418		6. Annual Report must be signed.* Signature: Deonna Hollist Name (type or print): Deonna Hollist					
		Date: 09/23/2016 Title: Bus Mgr					
Processed 09/23/2016		* Electronically provided signatures are accepted as original signatures.					