No. **W 115534**	**Due no later than Jul 31, 2018** **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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** ANABOLIC MUSCLE LABS LLC RICK JOHNS 727 BITTERROOT CT NAMPA ID 83686	RICK JOHNS 727 BITTERROOT CT NAMPA ID 83686-8368 3. New 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	CLINT ODOM	727 BITTERROOT CT	NAMPA	ID	USA	83686
MEMBER	RICK JOHNS	727 BITTERROOT CT	NAMPA	ID	USA	83686

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 115534**	Signature: rick johns	Date: 06/07/2018
	Name (type or print): rick johns	Title: owner

Processed 06/07/2018

* Electronically provided signatures are accepted as original signatures.