No. W 109517	Due no later than Dec 31, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			TERRI-ANNA OLLIVIERRA 4885 S WHITMORE WAY BOISE ID 83709			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	SERENITY IN MOTION MASSAGE THERAPY LLC TERRI-ANNA OLLIVIERRE PO BOX 191134		BOISE ID				
	BOISE ID 83719		3. <u>New</u> Regis	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
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	
MANAGER TERRI-ANNA	OLLIVIERRE	4885 S WHITMORE WAY	BOISE	ID	USA	83709	
5. Organized Under the Laws of:	6. Annual Report must be signed.*						
ID	Signature: TERR	nature: TERRI-ANNA Ollivierre		Date: 11/02/2017			
W 109517	Name (type or print): TERRI-ANNA Ollivierre			Title: Owner/Manager			
Processed 11/02/2017	* Electronically provided signatures are accepted as original signatures.						