No. W 87616	Due no later than Oct 31, 2013	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	LAUREN GUENTZLER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed.	73893 HWY 2 MOYIE SPRINGS ID 83845 3. New Registered Agent Signature:*			
	INNOVATIVE HEALTH SOLUTIONS LLC BRITTANY COPPERNOLL 6720 S MAIN ST				
	BONNERS FERRY ID 83805				
NO FILING FEE IF RECEIVED BY DUE DATE	USA				
4. Limited Liability Companies: Enter Na	ames and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MEMBER BRITTANY	L COPPERNOLL 6720 MAIN ST	BONNERS FERRY	ID	USA	83805
5. Organized Under the Laws of:	5. Annual Report must be signed.*				
ID	Signature: Brittany L Coppernoll	Date: 08/21/2013			
W 87616	Name (type or print): Brittany L Coppernoll	Title: Office Manager			
Processed 08/21/2013	* Electronically provided signatures are accepted as original signatures.				