No. <b>W 99051</b>		Due no later than Dec 31, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  HEALTHWELL VENTURES, LLC  AMY E MEYER  308 N 15TH ST  BOISE ID 83702		308 N 15TH BOISE 83	DR ANDREW MYERS 308 N 15TH ST BOISE 83702  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
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	ANDREW E	MYERS	4504 W QUAIL RIDGE DRIVE	BOISE	ID	USA	83703	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 99051		Signature: Amy Meyer		Date: 10/	Date: 10/20/2014			
		Name (type or print): Amy Meyer		Title: Op	Title: Operations Manager			
Processed 10/20/2014 * Electronically provided signatures are accepted as original signatures.								