No. W 148603		Due no later than Mar 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		CATHI KETTERLING			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LIPO BY L CATHI K 1330 FILI	1. Mailing Address: Correct in this box if needed. LIPO BY LIGHT, LLC CATHI KETTERLING 1330 FILER AVE E TWIN FALLS ID 83301		1330 FILER AVE E TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Er	ter Names and Add	lresses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	NE KETTERLING I KETTERLING	233 EDWARDS DR 233 EDWARDS DR	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83301	
5. Organized Under the Laws of:	6. Annual R	6. Annual Report must be signed.*					
ъ	Signatur	Signature: cathi Ketterling		Date: 04/05/2018			
W 148603	Name (ty	Name (type or print): cathi Ketterling		Title: Manager			
Processed 04/05/2018	* Electronically provided signatures are accepted as original signatures.						