

No. <b>W 133611</b>		<b>Due no later than Jan 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  NYE CHIROPRACTIC, PLLC RYAN NYE 1096 ERIKSON DR REXBURG ID 83440		RYAN NYE 1096 ERIKSON DR REXBURG 83440-8344			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name RYAN NYE	Street or PO Address 1096 ERIKSON DRIVE		City REXBURG	State ID	Country USA	Postal Code 83440
5. Organized Under the Laws of:  <b>ID</b> <b>W 133611</b>		6. Annual Report must be signed.*  Signature: Ryan Nye Name (type or print): Ryan Nye  Date: 02/16/2015 Title: President					
Processed 02/16/2015 * Electronically provided signatures are accepted as original signatures.							