No. W 79464		Due no later than Nov 30, 2017	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ORIGINS CORINA PO BOX	Annual Report Form 1. Mailing Address: Correct in this box if needed. ORIGINS PHARMACY SOLUTIONS LLC CORINA REYNA PO BOX 963 MIDDLETON ID 83644		JAREN REYNA 509 S MIDDLETON RD STE 105 MIDDLETON ID 83644 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		dresses of at least one Member or Manager.	5, <u></u> 1.05,010.	- Jan Angeline G			
Office Held Name	er Names and Ad	Street or PO Address	City	State	Country	Postal Code	
MEMBER CORIN	A REYNA REYNA	8653 LEGACY CT 8653 LEGACY CT	MIDDLETON MIDDLETON	ID ID	USA USA	83644 83644	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 79464		Signature: Corina A Reyna Date: 11/16/2017 Name (type or print): Corina A Reyna Title: CFO					
Processed 11/16/2017		* Electronically provided signatures are accepted as original signatures.					