

No. W 98202		Due no later than Nov 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. PALOUSE ACUPUNCTURE, LLC CASS MCLEAN 324 W A STREET MOSCOW ID 83843		CASS MABBUTT 200 S ALMON ST SUITE 102 MOSCOW ID 83843			
				3. <u>New</u> Registered Agent Signature:*			
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	CASS M MABBUTT	324 W A STREET	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 98202		Signature: Cass McLean				Date: 09/23/2014	
		Name (type or print): Cass McLean				Title: Owner	
Processed 09/23/2014		* Electronically provided signatures are accepted as original signatures.					