

No. <b>W 84155</b>	<b>Due no later than May 31, 2017</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> UR HEALTHY, LLC JAMES A DALE 421 S CURTIS RD #510 BOISE ID 83705		JAMES A DALE 421 S CURTIS RD #510 BOISE ID 83705			
			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
MANAGER	JAMES A DALE	421 S CURTIS RD # 510	BOISE	ID	USA	83705-7080
5. Organized Under the Laws of:  <b>ID W 84155</b>	6. Annual Report must be signed.* Signature: James A. Dale Name (type or print): James A. Dale		Date: 05/19/2017 Title: Manager			
Processed 05/19/2017		* Electronically provided signatures are accepted as original signatures.				