

No. <b>W 170247</b>		<b>Due no later than Aug 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> ORTHO-BIONOMY WITH LAURA LLC LAURA HOLTON PO BOX 176 GREENLEAF ID 83626 USA		LAURA HOLTON 20675 FRIENDS RD GREENLEAF ID 83626		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	LAURA L HOLTON	20675 FRIENDS RD	GREENLEAF	ID	USA	83626	
5. Organized Under the Laws of:  <b>ID W 170247</b>		6. Annual Report must be signed.* Signature: Laura Holton Name (type or print): Laura Holton Date: 09/28/2017 Title: Owner					
Processed 09/28/2017		* Electronically provided signatures are accepted as original signatures.					