

No. <b>W 103391</b>		<b>Due no later than May 31, 2014</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> CHIRO GROWTH SOLUTIONS, LLC JENNIFER KENNEDY 370 E KATHLEEN AVE STE 600 COEUR D ALENE ID 83815 USA		AMY LYNN SPOELSTRA 370 E KATHLEEN AVE STE 600 COEUR D ALENE ID 83814		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	AMY SPOELSTRA	370 E KATHLEEN AVE. SUITE 600	COEUR D'ALENE	ID	USA	08315	
5. Organized Under the Laws of:  <b>ID W 103391</b>		6. Annual Report must be signed.* Signature: Amy Spoelstra Name (type or print): Amy Spoelstra Date: 03/27/2014 Title: Member					
Processed 03/27/2014		* Electronically provided signatures are accepted as original signatures.					