

No. <b>W 61581</b>	<b>Due no later than Apr 30, 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> HEALING WISDOM, LLC CANDACE MAGNUSON 216 N. ADAMS ST. MOSCOW ID 83843		CANDACE MAGNUSON 216 N. ADAMS ST. 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
MANAGER	CANDACE MAGNUSON	216 N. ADAMS ST.	MOSCOW	ID	USA	83843
5. Organized Under the Laws of:  <b>ID</b> <b>W 61581</b>	6. Annual Report must be signed.* Signature: Candace Magnuson Name (type or print): Candace Magnuson		Date: 03/01/2017 Title: Owner			
Processed 03/01/2017		* Electronically provided signatures are accepted as original signatures.				