

No. <b>W 33152</b>		<b>Due no later than Sep 30, 2015</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> YOGAHEALER LLC CATHRYN STILLMAN 5029 N HWY 33 TETONIA ID 83452 USA		CATHRYN STILLMAN 5029 N HWY 33 TETONIA ID 83452		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	WINSTON WELCH	5029 N HWY 33	TETONIA	ID		83452	
5. Organized Under the Laws of:  <b>ID W 33152</b>		6. Annual Report must be signed.* Signature: Cathryn Stillman Name (type or print): Cathryn Stillman		Date: 07/27/2015 Title: CEO			
Processed 07/27/2015		* Electronically provided signatures are accepted as original signatures.					