No. W 140915			2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form 1. Mailing Address: Correct in this box if needed. KATIE SULLIVAN YOGA LLC KATHERINE SULLIVAN 2324 W NORTHCREST DR BOISE ID 83705		2324 W NOI BOISE ID	KATHERINE SULLIVAN 2324 W NORTHCREST DR BOISE ID 83705-8370 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter No	ames and Addresse	os of at least one Member or Manager					
Office Held Name	ines and Address	Street or PO Address	City	State	Country	Postal Code	
MEMBER KATHERINE SULLIVAN 2324 W NORCREST DR		2324 W NORCREST DR	BOISE	ID	USA	83705	
5. Organized Under the Laws of: ID W 140915	6. Annual Report must be signed.* Signature: Katherine Sullivan			Date: 09/19/2018			
Processed 09/19/2018	Name (type or print): Katherine Sullivan Title: Yoga Instructor * Electronically provided signatures are accepted as original signatures.						