

No. W 122329	Due no later than Feb 28, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. MIND BODY SOUL PHYSICAL THERAPY, PLLC MELANIE MICHAELS 5307 E QUARTERSAWN CT BOISE ID 83716		MELANIE MICHAELS 5307 E QUARTERSAWN CT BOISE ID 83716			
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MANAGER	Name MELANIE MICHAELS	Street or PO Address 5307 E QUARTERSAWN CT	City BOISE	State ID	Country USA	Postal Code 83716
5. Organized Under the Laws of: ID W 122329	6. Annual Report must be signed.* Signature: Melanie Michaels Name (type or print): Melanie Michaels Date: 01/15/2014 Title: Manager					
Processed 01/15/2014	* Electronically provided signatures are accepted as original signatures.					