

No. W 109957		Due no later than Jan 31, 2017		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. ELEVATION CHIROPRACTIC, LLC BRANDON COUCHMAN 10451 GARVERDALE CT SUITE 204 BOISE ID 83704		JENNIFER COUCHMAN 10451 GARVERDALE CT SUITE 204 BOISE ID 83704			
				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	BRANDON COUCHMAN	10451 GARVERDALE CT SUITE 204	BOISE	ID	USA	83704	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 109957		Signature: Brandon Couchman				Date: 11/21/2016	
		Name (type or print): Brandon Couchman				Title: Owner	
Processed 11/21/2016		* Electronically provided signatures are accepted as original signatures.					