

No. <b>W 58899</b>		<b>Due no later than Feb 29, 2012</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>1. Mailing Address: Correct in this box if needed.</b>  HEALING POINT, L.L.C. MEGGAN L BAUMGARTNER PO BOX 9381 MOSCOW ID 83843 USA		MEGGAN L BAUMGARTNER 803 S JEFFERSON ST STE 3 MOSCOW ID 83843			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	
MEMBER	LAURI A MCKEAN	PO BOX 9381	MOSCOW	ID	USA	83843	
MEMBER	MEGGAN L BAUMGARTNER	PO BOX 9381	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of:  <b>ID</b> <b>W 58899</b>		6. Annual Report must be signed.*  Signature: Meggan Baumgartner Name (type or print): Meggan Baumgartner					
Processed 12/12/2011		Date: 12/12/2011 Title: LAc, member, owner  * Electronically provided signatures are accepted as original signatures.					