No. <b>W 176321</b>		Due no later than Jan 31, 2018	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.	DAWN R JUKER 4375 E ALDERSTONE ST			
		ADVANCED HEALTH ALTERNATIVES, LLC DAWN R JUKER 4375 E ALDERSTONE ST	NAMPA ID 83686			
		NAMPA ID 83686	3. <u>New</u> Registered Agent Signature:*			
RECEIVED BY DUE DATE						
4. Limited Liability Com	panies: Enter Nar	mes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER DAWN JUKE		R 4375 E ALDERSTONE ST	NAMPA	ID	USA	83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: DAWN R JUKER	Date: 01/09/2018			
W 176321		Name (type or print): DAWN R JUKER	Title: CEO			
Processed 01/09/2018 * Electronically provided signatures are accepted as original signatures.						