


REINSTATEMENT

FILED EFFECTIVE

No. W 29169	Annual Report Form ADMIN DISSOLVED 06/08/2007	2. Registered Agent and Office NOT A P.O. BOX NICHOLAUS R ARNOLD 119 N KILDER WAY 1231 Beacon ST NAMPA, ID 83651 Boise, ID 83706												
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 FEE DUE \$30.00	1. Mailing Address - Correct in this box, if applicable HEALTHY LIVING LLC 11075 W MESQUITE DR 1231 Beacon st BOISE, ID 83713 Boise, ID 83706	3. <u>New</u> registered agent signature												
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of management. Limited and Limited Liability Partnerships: Enter names and addresses of at least two (2) partners.														
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Office held</th> <th style="text-align: left; border-bottom: 1px solid black;">Name</th> <th style="text-align: left; border-bottom: 1px solid black;">Street or P.O. Address</th> <th style="text-align: left; border-bottom: 1px solid black;">City</th> <th style="text-align: left; border-bottom: 1px solid black;">State</th> <th style="text-align: left; border-bottom: 1px solid black;">Zip</th> </tr> </thead> <tbody> <tr> <td style="padding-left: 20px;">Manager</td> <td>Nic Arnold</td> <td>1231 Beacon ST.</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> </tbody> </table>	Office held	Name	Street or P.O. Address	City	State	Zip	Manager	Nic Arnold	1231 Beacon ST.	Boise	ID	83706		
Office held	Name	Street or P.O. Address	City	State	Zip									
Manager	Nic Arnold	1231 Beacon ST.	Boise	ID	83706									
5. Organized under the laws of: IDAHO W 29169	6. Signature  Name (Typed or Printed) <u>Nic Arnold</u> Date <u>10/17/07</u> Title <u>Manager</u>													

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