No. W 187155		Due no later than Aug 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	VIRTUAL AARON S	Annual Report Form ng Address: Correct in this box if needed. REALITY INSTITUTE OF HEALTH AND EXERCIS STANTON EPPERWOOD DR	3861 N P BOISE II	AARON STANTON 3861 N PEPPERWOOD DR BOISE ID 83704-8370 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		resses of at least one Member or Manager.	5. <u>146W</u> 1469	istered Agent 3	igridui C.		
Office Held Name	i Names and Addi	Street or PO Address	City	State	Country	Postal Code	
MANAGER AARON	STANTON	3861	BOISE	ID	USA	83704	
6. Annual Report must be signed.*							
		e: Aaron Stanton		Date: 06/19/2018			
W 187155	Name (ty	pe or print): Aaron Stanton		Title: CEO			
Processed 06/19/2018	* Electronica	* Electronically provided signatures are accepted as original signatures.					