

No. W 144747	Due no later than Nov 30, 2015 Annual Report Form		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. T2 APOTHECARY, LLC 615 FILER AVE TWIN FALLS ID 83301		THOMAS G WADSWORTH 1101 N GAGE LN NAMPA ID 83687			
			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	THOMAS G WADSWORTH	21323 WHITE WATER CIRCLE	EAGLE RIVER	AK	USA	99577
5. Organized Under the Laws of: ID W 144747	6. Annual Report must be signed.* Signature: Thomas Wadsworth Name (type or print): Thomas Wadsworth		Date: 12/14/2015 Title: CEO			
Processed 12/14/2015		* Electronically provided signatures are accepted as original signatures.				