

No. W 78390		Due no later than Oct 31, 2018 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		1. Mailing Address: Correct in this box if needed. NUTRI LOGIC LLC. TRAVIS L MAXWELL PO BOX 343 NEW PLYMOUTH ID 83655		TRAVIS MAXELL 289 RIVER DOCK RD WEISER ID 83672			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name TRAVIS L MAXWELL	Street or PO Address 289 RIVER DOCK RD		City WEISER	State ID	Country USA	Postal Code 83672
5. Organized Under the Laws of: ID W 78390		6. Annual Report must be signed.* Signature: Travis Maxwell Name (type or print): Travis Maxwell Date: 09/06/2018 Title: Member					
Processed 09/06/2018 * Electronically provided signatures are accepted as original signatures.							