No. W 145278		Due no later than Dec 31, 2016		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. AHHHSOME RELAXATION INTERNATIONAL, LLC 939 SOUTH 25TH EAST 115 AMMON ID 83406		SHAWN TOLMAN 939 SOUTH 25TH EAST #115 AMMON ID 83406-8340 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
	oanies: Enter Na	mes and Addresses of at	least one Member or Manager.				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
MANAGER	SHAWN TO	LMAN	939 SOUTH 25TH EAST #115	AMMON	ID	USA	83406
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Shawn T	Date: 12/21/2016				
W 145278		Name (type or print)	Title: Manager				
Processed 12/21/2016		* Electronically provided signatures are accepted as original signatures.					