

No. W 60158		Due no later than Mar 31, 2011		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. NALBONE FAMILY CHIROPRACTIC AND WELLNESS, LLC JOSEPH NALBONE DC 7227 POTOMAC DR BOISE ID 83704-9150		JOSEPH NALBONE DC 7227 POTOMAC DR BOISE ID 83704-9150			
				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	JOSEPH NALBONE DC	7227 POTOMAC DR	BOISE	ID	USA	83704-9150	
MEMBER	STEFANI NALBONE BS	7227 POTOMAC DR	BOISE	ID	USA	83704-9150	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 60158		Signature: Joseph Nalbone				Date: 01/14/2011	
		Name (type or print): Joseph Nalbone				Title: Member	
Processed 01/14/2011		* Electronically provided signatures are accepted as original signatures.					