No. **W 107003**	**Due no later than Sep 30, 2016** **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.** AT FITNESS, LLC DEAN MORTIMER 6549 SOUTH 5TH WEST IDAHO FALLS ID 83404	DEAN MORTIMER 6549 SOUTH 5TH WEST IDAHO FALLS ID 83404 3. New 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	TAYSON H WEBB	6890 E. VALVERDE	IDAHO FALLS	ID	USA	83401

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 107003**	Signature: tayson webb	Date: 08/03/2016
	Name (type or print): tayson webb	Title: member

Processed 08/03/2016

* Electronically provided signatures are accepted as original signatures.