

No. <b>W 114370</b>	<b>Due no later than May 31, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>  SUPER FLY FITNESS LLC ALEXANDRA CHAPMAN 901 PIER VIEW DRIVE, SUITE 102 IDAHO FALLS ID 83402 USA		ALEXANDRA CHAPMAN 170 STILLWATER DR IDAHO FALLS ID 83404			
			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
MANAGER	ALEXANDRA CHAPMAN	901 PIER VIEW DRIVE SUITE 102	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of:  <b>ID</b> <b>W 114370</b>	6. Annual Report must be signed.* Signature: Alexandra chapman Name (type or print): Alexandra chapman		Date: 04/29/2015 Title: manager			
Processed 04/29/2015		* Electronically provided signatures are accepted as original signatures.				