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| No. W 115802 | Due no later than Jul 31, 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. RESTORATIVE BREAST THERAPY LLC SUSAN R STOCKTON P.O. BOX 397 GRANGER TX 76530-0397 | | SUSAN R STOCKTON 760 WARM SPRINGS AVE. STE S BOISE ID 83712 | | | |
| | | | 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 | SUSAN R STOCKTON | 760 WARM SPRINGS AVE. STE S | BOISE | ID | USA | 83712 |
| 5. Organized Under the Laws of: ID W 115802 | 6. Annual Report must be signed.* Signature: Susan R Stockton Name (type or print): Susan R Stockton | | Date: 07/31/2016 Title: Member | | | |
| Processed 07/31/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | |