

No. W 73012		Due no later than Apr 30, 2016		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. SPOELSTRA FAMILY CHIROPRACTIC, PLLC AMY SPOELSTRA 217 W SUNSET AVE COEUR D ALENE ID 83815		AMY SPOELSTRA 370 E KATHLEEN AVE STE 600 COEUR D ALENE ID 83815	
				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	AMY SPOELSTRA	15 W HONEYSUCKLE AVE	HAYDEN	ID	83835
5. Organized Under the Laws of: ID W 73012		6. Annual Report must be signed.* Signature: Amy Spoelstra Name (type or print): Amy Spoelstra Date: 02/25/2016 Title: Member			
Processed 02/25/2016		* Electronically provided signatures are accepted as original signatures.			