

No. W 125884		Due no later than Jun 30, 2015		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		Annual Report Form		KATHEEN M CURET 401 MAIN ST SALMON ID 83467			
		1. Mailing Address: Correct in this box if needed.		3. <u>New</u> Registered Agent Signature:*			
		WELL MIND, LLC KATHLEEN M CURET 401 MAIN ST SALMON ID 83467					
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	THOMAS S CURET	8 RISING SUN COURT	SALMON	ID	USA	83467	
MEMBER	KATHLEEN M CURET	8 RISING SUN COURT	SALMON	ID	USA	83467	
5. Organized Under the Laws of: ID W 125884		6. Annual Report must be signed.* Signature: Kathleen M. Curet Name (type or print): Kathleen M. Curet Date: 07/07/2015 Title: OWNER					
Processed 07/07/2015		* Electronically provided signatures are accepted as original signatures.					