No. <b>W 110154</b>		Due no later than Jan 31, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  DAYBREAK MASSAGE, LLC DEBORAH LYNN HALES 130 N 755 W BLACKFOOT ID 83221		DEBORAH LYNN HALES 130 N 755 W BLACKFOOT ID 83221  3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar		mes and Addresses of a	nt least one Member or Manager					
Office Held	Name	ries and ridaresses or e	Street or PO Address		City	State	Country	Postal Code
MANAGER	AGER DEBORAH HALES		130 N 755 W		BLACKFOOT	ID	USA	83221
5. Organized Under the Laws of:		6. Annual Report must be signed.* Signature: Deborah Lynn Hales			Date: 01/27/2018			
<b>W 110154</b> Processed 01/27/2018		Name (type or print): Deborah Lynn Hales Title: Manager  * Electronically provided signatures are accepted as original signatures.						