No. <b>W 18117</b>		Due no later than Feb 28, 2018		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form		KATHY BENNETT 1721 S. 10TH AVE. CALDWELL ID 83605				
SECRETARY OF STATE		1. Mailing Address: Correct in this box if needed.						
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		OASIS DAY SPA AND WELLNESS CENTER, L.L.C. KATHY BENNETT 1721 S. 10TH AVE.		CALDWELL ID 63003				
		CALDWELL ID 83605		3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Address	ses of at least one Member or Mana	ger.				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER KATHY BENN		NETT	1721 S. 10TH AVE.		CALDWELL	ID		83605
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kathy R. Bennett DC			Date: 03/26/2018			
W 18117		Name (type or print): Kathy R. Bennett DC			Title: owner			
Processed 03/26/2018	rocessed 03/26/2018 * Electronically provided signatures are accepted as original signatures.							