No. W 112940	Due no later than Apr 30, 2015	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	RODGER MICKELSEN			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	3821 PROFESSIONAL WAY #17 IDAHO FALLS 83402			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	EAST IDAHO STRENGTH AND CONDITIONING LLC RODGER MICKELSEN 2720 DORIS CIR	IDAHO FALLS	IDANO FALLS 03402		
	IDAHO FALLS ID 83402	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE					
4. Limited Liability Companies: Enter Na	mes and Addresses of at least one Member or Manager.				
Office Held Name	Street or PO Address	City	State	Country	Postal Code
MANAGER KATIE MICKELSEN 2720 DORIS CIRCLE		IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: Katie Mickelsen	Date: 04/17/2015			
W 112940	Name (type or print): Katie Mickelsen	Title: Manager			
Processed 04/17/2015	* Electronically provided signatures are accepted as original signatures.				