| No. W 155897 | | Due no later than Sep 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 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. PAYETTE RIVER WELLNESS, PLLC HANNA MCKENZIE YOUNG 8456 LIMELIGHT STREET APARTMENT #204 BOISE ID 83714 USA mes and Addresses of at least one Member or Manager. | | HANNA MCKENZIE YOUNG 8456 LIMELIGHT STREET APARTMENT #204 BOISE ID 83714-8371 | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | 3. <u>New</u> Registered Agent Signature:* | | | | |
| | vame | mes and Addresses of a | Street or PO Address | ger. | City | State | Country | Postal Code |
| | | | 8456 LIMELIGHT STREET #204 | APARTMENT | BOISE | ID | USA | 83714 |
| 5. Organized Under the Laws of: ID W 155897 | | 6. Annual Report must be signed.* Signature: Hanna McKenzie Young Name (type or print): Hanna McKenzie Young | | | | | : 10/02/201 : Owner | .6 |
| Processed 10/02/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |