

No. W 55050

Due no later than October 31, 2008
Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE
450 NORTH FOURTH STREET
PO BOX 83720
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

RELAXATION HEALTH & HEALING THERAPE
18670 PLUM RD
CALDWELL, ID 83607YVONNE M CARSON
18670 PLUM RD
CALDWELL, ID 83607NO FILING FEE IF
RECEIVED BY DUE DATE3. New Registered Agent Signature

4. Limited Liability Companies: Enter Names and Addresses of Members.

Office heldNameStreet or P.O. AddressCityStateZipSingle
Member

YVONNE M CARSON 18670 Plum Rd Caldwell ID 83607

5. Organized Under the Laws of:

IDAHO
W 55050

6.

Signature

Yvonne M. Carson

Date 8-15-08

Name

(Typed or
Printed)

YVONNE M. CARSON

Title

Single MEMBER

Issued 08/06/2008

Do Not Tape or Staple

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