

No. L 854		Due no later than Jan 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. NUTRITION CENTER (THE) MIKE BIERMANN 1326 OAKLEY AVE BURLEY ID 83318 USA		MIKE BERMANN 2109 TANNIE HEYBURN ID 83336				
Office Held		Name		Street or PO Address	City	State	Country	Postal Code
GENERAL PARTNER		SUSAN BIERMANN		2109 TANNIE	HEYBURN	ID	USA	83336
5. Organized Under the Laws of: ID L 854		6. Annual Report must be signed.* Signature: Mike Biermann Name (type or print): Mike Biermann						
Processed 11/20/2013		* Electronically provided signatures are accepted as original signatures. Date: 11/20/2013 Title: Partner						