

No. L 854		Due no later than Jan 31, 2014		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		Annual Report Form		MIKE BERMANN 2109 TANNIE HEYBURN ID 83336			
		1. Mailing Address: Correct in this box if needed. NUTRITION CENTER (THE) MIKE BIERMANN 1326 OAKLEY AVE BURLEY ID 83318 USA		3. <u>New</u> Registered Agent Signature: *			
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 Date: 11/20/2013 Title: Partner					
Processed 11/20/2013		* Electronically provided signatures are accepted as original signatures.					