

No. W 108436	Due no later than Nov 30, 2012 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.		LAURA E GLENN 128 S EAGLE RD STE 200 EAGLE ID 83616			
	TREASURE VALLEY NATURAL MEDICINE, PLLC LAURA E GLENN 128 S EAGLE RD STE 200 EAGLE ID 83616		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER	LAURA E GLENN	128 S EAGLE RD STE 200	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 108436		6. Annual Report must be signed.* Signature: Laura E. Glenn Name (type or print): Laura E. Glenn		Date: 12/14/2012 Title: Owner		
Processed 12/14/2012		* Electronically provided signatures are accepted as original signatures.				