

No. W 110811		Due no later than Feb 28, 2013		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. INTEGRATIVE WELLNESS CENTER LLC WILLIAM IRVING 1906 JAMES CROWE DR HAYDEN ID 83835		WILLIAM IRVING 1906 JAMES CROWE DR HAYDEN ID 83835			
				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	WILLIAM S IRVING	1906 JAMES CROWE DR	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 110811		Signature: William Irving				Date: 01/11/2013	
		Name (type or print): William Irving				Title: Owner	
Processed 01/11/2013		* Electronically provided signatures are accepted as original signatures.					