

No. W 108282	Due no later than Nov 30, 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. PREVENTATIVE HEALTH SERVICES, LLC DANIELLE BENNION 1243 E. IRON EAGLE DR., #130F EAGLE ID 83616 USA		DANIELLE BENNION 1243 E. IRON EAGLE DR., #130F 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	DANIELLE B BENNION	1243 E. IRON EAGLE DR., #130F	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 108282		6. Annual Report must be signed.* Signature: Danielle Bennion Name (type or print): Danielle Bennion Date: 09/23/2014 Title: Ceo				
Processed 09/23/2014		* Electronically provided signatures are accepted as original signatures.				