No. <b>W 68195</b>	D	Due no later than Nov 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form  1. Mailing Address: Correct in this box if needed.  LIFE DESIGN, LLC  LAREE PACKARD  3420 ALTURAS CT  POCATELLO ID 83201		LAREE PARKARD 3420 ALTURAS CT POCATELLO 83201  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LIFE DESIGN, LAREE PACK 3420 ALTURA						
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
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	
MEMBER LAREE P. MEMBER SANDRA	ARKARD ROBERTS	3420 ALTURAS CT 1566 SATTERFIELD DR	POCATELLO POCATELLO	ID ID		83201 83201	
5. Organized Under the Laws of: 6. Annu-		. Annual Report must be signed.*					
ID	Signature: L	Signature: Laree Packard Date: 11/21/2014					
W 68195	Name (type	or print): Laree Packard		Title: co owner			
Processed 11/21/2014	* Electronically	* Electronically provided signatures are accepted as original signatures.					