No. <b>W 86816</b>		Due no later than Sep 30, 2013		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  EATING DISORDER CENTER, LLC (THE)  KRISTI L SHOHET  2584 N STOKESBERRY  MERIDIAN ID 83646		9443 W GOI STAR ID 8	KRISTI L SHOHET 9443 W GOLDEN VIEW STAR ID 83669  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar				J. <u>INCW</u> Registe	Ted Agent 3	ignature.		
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	KRISTI L SHOHET		2584 N. STOKESBERRY	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of:  ID  W 86816		6. Annual Report must be signed.* Signature: Kristi L Shohet Name (type or print): Kristi L Shohet			Date: 10/01/2013 Title: Owner			
Processed 10/01/2013 * Electronically provided signatures are accepted as original signatures.								