No. W 148819		Due no later than Mar 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. MARY'S WELLNESS LLC 160 E VALLEY RIVER DR #2 REXBURG ID 83440		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				RICK BARTON 160 E VALLEY RIVER DR #2 REXBURG ID 83440 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE							
700	mpanies: Enter Nai	nes and Addresses of at least one M					
Office Held	Name	Street or	PO Address	City	State	Country	Postal Code
MEMBER RICK BARTO		N 160 E VAL	LEY RIVER DR. #1	REXBURG	ID	USA	83440
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Rick Barton		Date: 02/02/2018			
W 148819		Name (type or print): Rick Barton		Title: Member			
Processed 02/02/2018 * Electronically provided signatures are accepted as original signatures.							