

No. W 79144	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. HEALTHY KITCHEN COACH, LLC ALICE M ANDERSON 466 ROSEWOOD DRIVE EAST TWIN FALLS ID 83301-3642 USA	ALICE M ANDERSON 466 ROSEWOOD DR EAST TWIN FALLS ID 83301-3642	
		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	ALICE M ANDERSON	466 ROSEWOOD DRIVE EAST	TWIN FALLS ID USA 83301-3642
5. Organized Under the Laws of: ID W 79144	6. Annual Report must be signed.* Signature: Alice M. Anderson Name (type or print): Alice M. Anderson		Date: 09/23/2014 Title: Manager
Processed 09/23/2014		* Electronically provided signatures are accepted as original signatures.	