

No. W 17755		Due no later than Jan 31, 2017		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. HEALTH-FIT DESIGNS, LLC CHRISTOPHER E. VELOZ 3828 E FLAMINGO AVE NAMPA ID 83687		CHRISTOPHER VELOZ 3828 E FLAMINGO AVE NAMPA ID 83687			
				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	
MEMBER	JOCABED C. VELOZ	721 5TH STREET SOUTH	NAMPA	ID	USA	83651	
MEMBER	CHRISTOPHER E VELOZ	721 5TH STREET SOUTH	NAMPA	ID	USA	83651	
5. Organized Under the Laws of: ID W 17755		6. Annual Report must be signed.* Signature: Christopher Edward Veloz Name (type or print): Christopher Edward Veloz Date: 12/16/2016 Title: Member Manager					
Processed 12/16/2016		* Electronically provided signatures are accepted as original signatures.					