No. <b>W 166998</b>		Due no later than May 31, 2017 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		1. Mailing Address: Correct in this box if needed.  ONE LIFE LLC 24239 EL PASO RD CALDWELL ID 83607	24239 EL PA: CALDWELL I	AMY DAVIS 24239 EL PASO RD CALDWELL ID 83607  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Cor	mpanies: Enter Nar	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	AMY DAVIS	24239 EL PASO RD	CALDWELL	ID	USA	83607	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Amy Davis		Date: 03/24/2017			
W 166998		Name (type or print): Amy Davis	,	Title: Owner			
Processed 03/24/2017 * Electronically provided signatures are accepted as original signatures.							