

No. W 95185		Due no later than Jul 31, 2016		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. PH PURE HEALTH LLC IVAN D KIER 5525 W. BLVD. #184 VANCOUVER CANADA V6M3W6		JOSHUA SEARLE 3395 SOUTH HOLMES IDAHO FALLS ID 83404	
				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	IVAN D KIER	5525 W. BLVD. #184	VANCOUVER		CANADA V6M3W6
5. Organized Under the Laws of: ID W 95185		6. Annual Report must be signed.* Signature: Ivan Kier Name (type or print): Ivan Kier Date: 06/27/2016 Title: Member			
Processed 06/27/2016		* Electronically provided signatures are accepted as original signatures.			