No. W 166086		Due no later than May 31, 2017		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		ACCOUNTS OF A CONTROL OF	JENISE BARRIE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. BARRIE THERAPEUTIC MASSAGE, LLC JENISE BARRIE 4352 S CHOCTAW WAY BOISE ID 83709		BOISE ID	4352 S CHOCTAW WAY BOISE ID 83709 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JENISE BARF		RIE	4352 S. CHOCTAW WAY	BOISE	ID	USA	83709	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jenise Barrie			Date: 03/21/2017			
W 166086		Name (type or	print): Jenise Barrie		Title: Owner			
Processed 03/21/2017 * Electronically provided signatures are accepted as original signatures.								