No. W 95536		Due no later than Aug 31, 2011		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. FIT MOM LLC NICOLE PALMER 2145 W DIVIDE CREEK MERIDIAN ID 83646		2145 W DIVI MERIDIAN II	NICOLE PALMER 2145 W DIVIDE CREEK MERIDIAN ID 83646 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at	least one Member or Manager					
Office Held	Name	ries and riddresses of ac	Street or PO Address	City	State	Country	Postal Code	
MANAGER NICOLE PALMER		MER	2145 W. DIVIDE CREEK ST.	MERIDIAN	ID	USA	83646	
5. Organized Under the Laws of: ID W 95536		6. Annual Report must be signed.* Signature: Nicole Palmer Name (type or print): Nicole Palmer			Date: 08/10/2011 Title: Owner			
Processed 08/10/2011 * Electronically provided signatures are accepted as original signatures.								