No. W 172159	Due no later than Sep 30, 2017		2. Registered Agent and Address (NO PO BOX)			
eturn to: Annual Report Form		ual Report Form	JOEL P OSBORNE			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. BODHI ORGANIC SALON, LLC BODHI ORGANIC SALON, LLC 814 W HAYDEN AVE HAYDEN ID 83835		11776 N FRIAR DRIVE HAYDEN ID 83835			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
			3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
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 CHANDRA L	OSBORNE	11776 N FRIAR DRIVE	HAYDEN	ID	USA	83835
5. Organized Under the Laws of:	6. Annual Report must					
ID	Signature: Joel P Osborne		Date: 07/24/2017			
W 172159 Name (type or print): Joel P Osborne		Title: Owner				
Processed 07/24/2017	* Electronically provided signatures are accepted as original signatures.					