No. W 61581 Return to:		Due no later than Apr 30, 2018 Annual Report Form			Registered Agent and Address (NO PO BOX) CANDACE MAGNUSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HEALING WISDOM, LLC CANDACE MAGNUSON 216 N. ADAMS ST. MOSCOW ID 83843		MOSCOW II	216 N. ADAMS ST. MOSCOW ID 83843 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nar	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	CANDACE MAGNUSON		216 N. ADAMS ST.	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 61581		Signature: Car		Date: 03/09/2018				
		Name (type or	print): Candace Magnuson		Title: Owner			
Processed 03/09/2018 * Electronically provided signatures are accepted as original signatures.								