

No. W 29295	Due no later than Mar 31, 2015 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. VITAL EDGE LLC (THE) VALARAE ALLRED 1303 RED CEDAR RD REXBURG ID 83440	VALARAE ALLRED 1303 RED CEDAR RD REXBURG 83440			
		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	TRAVIS ALLRED	37 SOUTH 4TH WEST APT A	REXBURG	ID	83440
5. Organized Under the Laws of: ID W 29295	6. Annual Report must be signed.* Signature: Travis Allred Name (type or print): Travis Allred		Date: 03/09/2015 Title: Member		
Processed 03/09/2015		* Electronically provided signatures are accepted as original signatures.			