No. W 186277		Due no later than Jul 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. LIFE WORKZ, LLC 428 PARK AVE IDAHO FALLS ID 83402		2	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					C TIMOTHY HOPKINS 428 PARK AVE IDAHO FALLS ID 83402 3. New Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held Na	me		Street or PO Address		City	State	Country	Postal Code
MEMBER QU	JEENIE M	LINDERMAN	8456 W LIMELIGHT #302		BOISE	ID		83714
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID.		Signature: C. Timothy Hopkins			Date: 05/30/2018			
W 186277		Name (type or print): C. Timothy Hopkins			Title: Attorney			
Processed 05/30/2018	* Electronically provided signatures are accepted as original signatures.							