

No. W 135789		Due no later than Mar 31, 2018		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. NOMADIC SPIRITUAL HEALINGS LLC C/O KATHLEEN ROMA CPA 776 E RIVERSIDE DR STE 240 EAGLE ID 83616		KATHLEEN F ROMA CPA PLLC 776 E RIVERSIDE DR STE 240 EAGLE ID 83616	
				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
MANAGER	CRYSTA LYON	6843 BARKWOOD DRIVE	JACKSONVILLE	FL	USA
Postal Code 32277					
5. Organized Under the Laws of: ID W 135789		6. Annual Report must be signed.* Signature: Crysta Lyon Name (type or print): Crysta Lyon Date: 02/27/2018 Title: Manager			
Processed 02/27/2018		* Electronically provided signatures are accepted as original signatures.			