

No. W 117934		Due no later than Oct 31, 2013		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. VAN SICKLE CHIROPRACTIC LLC JASON VAN SICKLE 1100 N COLE RD BOISE ID 83704 UNITED STATES		JASON VAN SICKLE 1100 N COLE RD BOISE ID 83704			
				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	
MANAGER	JASON VAN SICKLE	1100 N COLE RD	BOISE	ID	USA	83704	
5. Organized Under the Laws of: ID W 117934		6. Annual Report must be signed.* Signature: Jason Van Sickle Name (type or print): Jason Van Sickle Date: 08/08/2013 Title: Owner					
Processed 08/08/2013		* Electronically provided signatures are accepted as original signatures.					