| No. <b>C 198045</b>  |             | Annual Report Form  1. Mailing Address: Correct in this box if needed.  HEALTHY HABITS MANAGEMENT COMPANY 1712 PIONEER AVE #471 CHEYENNE WY 82001 |   | 2. Registered A            | 2. Registered Agent and Address (NO PO BOX)  |         |             |  |
|--|-------------|---|---|----------------------------|--|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |             |   |   | 26 S BALTIC<br>MERIDIAN II | KIMBALL LINDAHL 26 S BALTIC PL #150 MERIDIAN ID 83642  3. New Registered Agent Signature:* |         |             |  |
| RECEIVED BY  | DUE DATE    | ess Addresses o   | of President, Secretary, and Directors. Treas | surer (optional).          |  |         |             |  |
| Office Held  | Name        |   | Street or PO Address                          | City                       | State  | Country | Postal Code |  |
| PRESIDENT  | KIMBALL LUI | NDAHL   | 26 S BALTIC PL #150                           | MERIDIAN                   | ID   | USA     | 83642       |  |
| 5. Organized Under the Laws of:  |             | 6. Annual Report must be signed.*   |   |                            |  |         |             |  |
| WY   |             | Signature: k  | (imball Lundahl                               |                            | Date: 03/28/2016   |         |             |  |
| C 198045   |             | Name (type  | or print): Kimball Lundahl                    |                            | Title: President   |         |             |  |
| Processed 03/28/201  | .6          | * Electronically provided signatures are accepted as original signatures.   |   |                            |  |         |             |  |