

No. <b>W 161833</b>		<b>Due no later than Feb 28, 2018</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  SKIN THERAPY, LLC SKIN THERAPY LLC 3112 N MCKINNEY ST BOISE ID 83704		KARA ALLEN 3112 N MCKINNEY ST BOISE ID 83704-8370			
				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	KARA J ALLEN	3112 N MCKINNEY ST	BOISE	ID	USA	83704-6030	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 161833</b>		Signature: Kara Allen				Date: 01/03/2018	
		Name (type or print): Kara Allen				Title: Owner	
Processed 01/03/2018		* Electronically provided signatures are accepted as original signatures.					