No. <b>W 77940</b>		Due no later than Sep 30, 2013 Annual Report Form		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  WEDDING DOCTOR, LLC (THE)  BRAD M ROWEN  532 E CURLING DR  BOISE ID 83702			BRAD ROWEN 532 E CURLING DR BOISE ID 83702  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses of at le	east one Member or Manager.					
Office Held	Name		Street or PO Address	C	City	State	Country	Postal Code
MANAGER	MANAGER BRAD M ROWEN		532 E CURLING DRIVE	В	OISE	ID	USA	83702
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Brad Rowen			Date: 08/30/2013			
W 77940		Name (type or print): Brad Rowen			Title: President			
Processed 08/30/2013 * Electronically provided signatures are accepted as original signatures.								