No. **W 44093**	**Due no later than Oct 31, 2010**	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**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** RELIEF WORKERS MASSAGE THERAPY, P.L.L.C PAUL W DAUGHARTY 110 E WALLACE AVE COEUR D ALENE ID 83814	PAUL W DAUGHARTY 110 E WALLACE AVE COEUR D'ALENE ID 83814 3. New 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
MEMBER	LAURA MORRIS	PO BOX 1239	COEUR D'ALENE	ID	USA	83816-1239

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 44093**	Signature: Paul W. Daugharty	Date: 08/12/2010
	Name (type or print): Paul W. Daugharty	Title: Registered Agent

Processed 08/12/2010

* Electronically provided signatures are accepted as original signatures.