No. W 128019		Due no later than Aug 31, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MICHELLE'S MASSAGE LLC MICHELLE PORTER 5157 E CUB RIVER RD PRESTON ID 83263	5157 E CUB PRESTON II	MICHELLE PORTER 5157 E CUB RIVER RD PRESTON ID 83263 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Con	npanies: Enter Na	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	PORTER	5157 E CUB RIVER RD	PRESTON	ID	USA	83263	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Michelle Porter	Date: 09/22/2018				
W 128019		Name (type or print): Michelle Porter	Title: owner				
Processed 09/22/2018 * Electronically provided signatures are accepted as original signatures.							