

No. W 47084		Due no later than Feb 28, 2009		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. WELLNESS @ WORK LLC KOLETTE M BROCKHOFF 1177 JAYNO CT COEUR D ALENE ID 83815		KOLETTE M BROCKHOFF 1177 JAYNO CT COEUR D ALENE ID 83815	
				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
MEMBER	KOLETTE M BROCKHOFF	1177 JAYNO CT	COEUR D ALENE	ID	USA 83815
5. Organized Under the Laws of: ID W 47084		6. Annual Report must be signed.* Signature: Kolette M. Brockhoff Name (type or print): Kolette M. Brockhoff Date: 03/23/2009 Title: Member			
Processed 03/23/2009		* Electronically provided signatures are accepted as original signatures.			