No. C 212834		Due no later than Feb 28, 2018		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		KIMBERLY TAYLOR			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CLASSIC RE KIMBERLY 1 2539 CHANN STE 220	L. Mailing Address: Correct in this box if needed. CLASSIC RECOVERY INC KIMBERLY TAYLOR 2539 CHANNING WAY STE 220 IDAHO FALLS ID 83404		2758 LINCOLN RD IDAHO FALLS ID 83401 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATI							
4. Corporations: Enter Names a	nd Business Addresses o	of President, Secretary, and Directors. Trea	asurer (optional).				
Office Held Nam	e	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT KIMBERLY TAYLOR		2758 LINCOLN RD	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: 6. Annu		. Annual Report must be signed.*					
п	Signature: I	Signature: KIMBERLY TAYLOR		Date: 01/17/2018			
C 212834	Name (type	Name (type or print): KIMBERLY TAYLOR		Title: PRES			
Processed 01/17/2018	* Electronically	* Electronically provided signatures are accepted as original signatures.					