

No. <b>W 55160</b>		<b>Due no later than Oct 31, 2013</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> SOLACE NATURAL MEDICINE, PLLC JONAS E BEAN PO BOX 129 MCCALL ID 83638-0129 USA		BRANETTE BEAN SOLACE 715 BRIDLE PATH WAY MCCALL ID 83638-0129			
				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	
MANAGER	BRANETTE B SOLACE	PO BOX 129 301 COLORADO ST	MCCALL	ID	USA	83638	
MANAGER	JONAS E BEAN	PO BOX 129 301 COLORADO ST	MCCALL	ID	USA	83638	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 55160</b>		Signature: Jonas Bean				Date: 09/26/2013	
		Name (type or print): Jonas Bean				Title: Manager	
Processed 09/26/2013		* Electronically provided signatures are accepted as original signatures.					