

No. <b>W 137332</b>	<b>Due no later than Apr 30, 2018</b> <b>Annual Report Form</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> WELLNESS IMPACT NUTRITION, LLC DEENA LAJOIE 1013 E WINDING CREEK DR STE 102 EAGLE ID 83616		DEENA LAJOIE 3797 NORTH CROFT WAY Eagle ID 83616			
			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	DEENA LAJOIE	3797 NORTH CROFT WAY	EAGLE	ID	USA	83616
5. Organized Under the Laws of:  <b>ID</b> <b>W 137332</b>	6. Annual Report must be signed.* Signature: Deena LaJoie Name (type or print): Deena LaJoie		Date: 05/04/2018 Title: Managing Member			
Processed 05/04/2018		* Electronically provided signatures are accepted as original signatures.				