

No. W 107792		Due no later than Oct 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. MT THERAPY LLC MEGAN J TOUPIN 256 N 11TH POCATELLO ID 83201		MEGAN J TOUPIN 256 N 11TH POCATELLO 83201			
NO FILING FEE IF RECEIVED BY DUE DATE				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	MEGAN J TOUPIN	256 NORTH 11TH	POCATELLO	ID	USA	83201	
5. Organized Under the Laws of: ID W 107792		6. Annual Report must be signed.* Signature: Megan J Toupin Name (type or print): Megan J Toupin					
		Date: 10/31/2014 Title: MOTR/L					
Processed 10/31/2014 * Electronically provided signatures are accepted as original signatures.							