No. W 130485	Due no later than Oct 31, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		to provide to the second	JENNIFER A UNGER			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed. BLOOM WHERE PLANTED THERAPY SERVICES, LLC JENNIFER A UNGER 1498 FALL RIVER ROAD			1498 FALL RIVER ROAD IDAHO FALLS ID 83401			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			IDANO FALLS	IDANO FALLS ID 65401			
	IDAHO FALLS ID 83401		3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	110 1						
4. Limited Liability Companies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER JENNIFER A	NN UNGER	1498 FALL RIVER ROAD	IDAHO FALLS	ID	USA	83401	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	Signature: Jer	Date: 09/08/2014					
W 130485	Name (type or print): Jennifer A Unger			Title: Manager			
Processed 09/08/2014	* Electronically provided signatures are accepted as original signatures.						