No. <b>W 106539</b>		Due no later than Sep 30, 2018	2. Registered Agent and Address (NO PO BOX)  SARAH BRETT  356 MOUNT SMITH ESTATES  COCOLALLA ID 83813  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  LOVE HEALTHY ME LLC  SARAH BRETT  356 MOUNT SMITH ESTATES  COCOLALLA ID 83813				
NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Fotor Nar		nes and Addresses of at least one Member or Manager.				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MANAGER SARAH BRET		TT 356 MT SMITH ESTATES	COCOLALLA	ID	USA	83813
5. Organized Under the Laws of:  ID  W 106539		6. Annual Report must be signed.* Signature: Sarah Brett Name (type or print): Sarah Brett	Date: 07/31/2018 Title: manager			
Processed 07/31/2018 * Electronically provided signatures are accepted as original signatures.						