

No. <b>W 140180</b>		<b>Due no later than Jul 31, 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>1. Mailing Address: Correct in this box if needed.</b>  FAR NORTH THERAPEUTICS, LLC 1207 MICHIGAN ST STE B SANDPOINT ID 83864		WILLIAM STEPHEN MIHIN 609 N. LINCOLN AVE. SANDPOINT ID 83864			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name WILLIAM STEPHEN MIHIN	Street or PO Address 609 N. LINCOLN AVE.		City SANDPOINT	State ID	Country USA	Postal Code 83864
5. Organized Under the Laws of:  <b>ID</b> <b>W 140180</b>		6. Annual Report must be signed.*  Signature: William Mihin Name (type or print): William Mihin  Date: 06/08/2018 Title: MANAGER					
Processed 06/08/2018 * Electronically provided signatures are accepted as original signatures.							