

No. <b>W 38349</b>		<b>Due no later than Apr 30, 2016</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>  EVERYBODIESFITNESS LLC MIKE S RICE PO BOX 5622 BOISE ID 83705		MIKE S RICE 1211 TARGEE BOISE ID 83706			
<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 MIKE S RICE	Street or PO Address 1211 TARGEE		City BOISE	State ID	Country	Postal Code 83706
5. Organized Under the Laws of:  <b>ID</b> <b>W 38349</b>		6. Annual Report must be signed.*  Signature: mike S rice Name (type or print): mike S rice  Date: 02/22/2016 Title: manager					
Processed 02/22/2016 * Electronically provided signatures are accepted as original signatures.							