No. W 149569		Due no later than Mar 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE		Annual Report Form 1. Mailing Address: Correct in this box if needed.		SHAWN READ 1908 ALDER ST			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	BLUE COLLAR SPAS SHAWN READ 1908 ALDER ST CALDWELL ID 830	S AND REPAIR, LLC	CALDWELL ID 83605 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Er	ter Names and Addresses of	at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER SHAW	N BLUE COLLAR SPAS	123 E 44TH ST	GARDEN CITY	ID	USA	83714	
5. Organized Under the Laws of: 6. Annual Report		st be signed.*					
ID	Signature: SIr	nature: SIr		Date: 03/10/2016			
W 149569	Name (type or prin	Name (type or print): SIr		Title: Owner			
Processed 03/10/2016	* Electronically provide	* Electronically provided signatures are accepted as original signatures.					