No. W 158643		Due no later than Nov 30, 2016			2. Registered Agent and Address (NO PO BOX)			
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. WELLNESS ETC. L.L.C. EMILY POTTER 10296 W SHIRLEY YOUNG LN RATHDRUM ID 83858			EMILY POTTER 10296 W SHIRLEY YOUNG LN RATHDRUM ID 83858 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		USA mes and Address	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	(City	State	Country	Postal Code
MANAGER TENLEY MOL		LZAHN	432 2ND ST UNIT E	E	ENCINITAS	CA	USA	92924
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
110		Signature: Emily Potter			Date: 10/18/2016			
W 158643		Name (type or print): Emily Potter			Title: Clinical Nutritionist			
Processed 10/18/2016 * Electronically provided signatures are accepted as original signatures.								