No. W 68034		Due no later than Oct 31, 2012		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		LORI JOSLIN 13726 PURPLE SAGE RD CALDWELL ID 83607			
SECRETARY OF STATE	1. Mailing	1. Mailing Address: Correct in this box if needed. BALANCED EQUINE WELLNESS, LLC LORI L IRELAND 13726 PURPLE SAGE RD CALDWELL ID 83607 USA					
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LORI L IREL						
				3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Ent	er Names and Address	ses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER DR HEA	THER MACK	13726 PURPLE SAGE RD	CALDWELL	ID	USA	83607	
MEMBER LORI L IRELAND		13726 PURPLE SAGE RD	CALDWELL	ID	USA	83607	
5. Organized Under the Laws of: 6. Annual Re		ort must be signed.*					
ID	Signature: L	Signature: Lori L Ireland Date: 09/04/2012					
W 68034	Name (type	or print): Lori L Ireland		Title: Member			
Processed 09/04/2012	* Electronically	* Electronically provided signatures are accepted as original signatures.					