No. <b>W 123223</b>		Due no later than Mar 31, 2015		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		KIM R PEA	KIM R PEARSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  LIFE AFTER CHEMO, LLC  KIM R PEARSON  452 E SUNNYSIDE RD  SANDPOINT ID 83864		SANDPOINT	452 E SUNNYSIDE RD SANDPOINT 83864  3. New Registered Agent Signature:*			
NO FILING F RECEIVED BY D	UE DATE							
4. Limited Liability Comp	oanies: Enter Na	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	SARAH KAL	OMIROS, DC	8343 AINSWORTH DRIVE	HAYDEN	ID	USA	83835	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 123223		Signature: kim r pearson		Date	Date: 03/30/2015			
		Name (type or print): kim r pearson		Title	Title: Registered Agent			
Processed 03/30/2015		* Electronically provided signatures are accepted as original signatures.						