

| | | | | | | | |
|--|---------------|--|------|--|---------|-------------|--|
| No. W 114796 | | Due no later than Jun 30, 2014 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. LIFE'S SCRIBE LLC JOSHUA AUSTIN 509 N CARSWELL WAY STAR ID 83669 | | JOSHUA AUSTIN 509 N CARSWELL WAY STAR ID 83669 | | | |
| | | | | 3. <u>New</u> Registered Agent Signature: * | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER | JOSHUA AUSTIN | 509 N. CARSWELL WAY | STAR | ID | USA | 83669 | |
| 5. Organized Under the Laws of: ID W 114796 | | 6. Annual Report must be signed.* Signature: Josh Austin Name (type or print): Josh Austin Date: 04/14/2014 Title: Managing member | | | | | |
| Processed 04/14/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | | |