No. W 111582			Due no later than Feb 28, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:			Annual Report Form		MARSHA W HUFFMAN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		FRACTIONAI MARSHA W 8283 WILLO	1. Mailing Address: Correct in this box if needed. FRACTIONAL ESCAPES, LLC MARSHA W HUFFMAN 8283 WILLOWPARK GARDEN CITY ID 83714		8283 WILLOWPARK GARDEN CITY ID 83714 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter	Names and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	MARSHA	W HUFFMAN	8283 WILLOWARK	GARDEN CITY	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Repo	6. Annual Report must be signed.*					
ID		Signature: N	Yarsha W. Huffman		Date: 12/18/2013			
W 111582		Name (type	or print): Marsha W. Huffman		Title: Manager			
Processed 12/18/2013 * Electronically provided signatures are accepted as original signatures.								