

No. <b>W 15350</b>		<b>Due no later than May 31, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ARMA'S BEAUTY SALON, L.L.C. R DAVID FJALA PO BOX 5064 TWIN FALLS ID 83303-5064		ARMA BAJRAKTREVIC 616 MADISON ST TWIN FALLS ID 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	ARMA BAJRAKTAREVIC	616 MADISON	TWIN FALLS	ID	USA	83301	
MEMBER	AMIR BAJRAKTAREVIC	616 MADISON	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of:  <b>ID</b> <b>W 15350</b>		6. Annual Report must be signed.*  Signature: Arma Bajraktarevic Name (type or print): Arma Bajraktarevic					
Processed 05/14/2013		Date: 05/14/2013 Title: Member  * Electronically provided signatures are accepted as original signatures.					