

|  |                          |  |  |  |             |                |                      |
|--|--------------------------|--|--|--|-------------|----------------|----------------------|
| No. <b>W 60420</b>   |                          | <b>Due no later than Mar 31, 2014</b><br><b>Annual Report Form</b>   |  | 2. Registered Agent and Address ( <b>NO PO BOX</b> )     |             |                |                      |
| Return to:<br><br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080 |                          | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>MARYJANE'S VISIONWORKS, LLC<br>MARYJANE BUTTERS<br>1000 WILD IRIS LN<br>MOSCOW ID 83843 |  | MARYJANE BUTTERS<br>1000 WILD IRIS LN<br>MOSCOW ID 83843 |             |                |                      |
| <b>NO FILING FEE IF<br/>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<br>MANAGER   | Name<br>MARYJANE BUTTERS | Street or PO Address<br>1000 WILD IRIS LN  |  | City<br>MOSCOW   | State<br>ID | Country<br>USA | Postal Code<br>83843 |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 60420</b>                                 |                          | 6. Annual Report must be signed.*<br><br>Signature: Lucas Rae<br>Name (type or print): Lucas Rae<br><br>Date: 03/17/2014<br>Title: Bookkeeper            |  |  |             |                |                      |
| Processed 03/17/2014 * Electronically provided signatures are accepted as original signatures.     |                          |  |  |  |             |                |                      |