

No. <b>W 67021</b>		<b>Due no later than Sep 30, 2013</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>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  TASTEFUL SINSATIONS LLC LESLI CROOKS 5634 W STATE ST BOISE ID 83703		LESLI CROOKS NORTHUP 5723 W ELLENS FERRY DR BOISE ID 83703			
				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	LESLI CROOKS NORTHUP	5723 W ELLENS FERRY DR	BOISE	ID	USA	83703	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>ID W 67021</b>		Signature: Lesi Crooks				Date: 09/09/2013	
		Name (type or print): Lesi Crooks				Title: Owner	
Processed 09/09/2013		* Electronically provided signatures are accepted as original signatures.					