| No. W 99130 | | Due no later than Dec 31, 2016 | | 2. Registered | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------|---|--------------------------------------|---------------------------------------|---|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. REMEDY SKINCARE LLC VIDA LIETUVNINKAS 729 N 15TH STREET BOISE ID 83702 | | 729 N 15TH BOISE ID | VIDA LIETUVNINKAS 729 N 15TH STREET BOISE ID 83702 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4 Limited Liability Companies: Enter Nar | | mes and Addresse | s of at least one Member or Manager. | | | | | |
| Office Held | Name | mes and made esse | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER VIDA LIETUV | | VNINKAS | 729 N 15TH STREET | BOISE | ID | USA | 83702 | |
| 5. Organized Under the Laws of: ID W 99130 | | 6. Annual Report | | Date: 10/31/2016 Title: Accountant | | | | |
| Processed 10/31/2016 | <u>'</u> | Name (type or print): Hazen Armstrong Title: Accountant * Electronically provided signatures are accepted as original signatures. | | | | | | |