| No. W 77940 | | Due no later than Sep 30, 2015 | | 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. WEDDING DOCTOR, LLC (THE) BRAD M ROWEN 5851 N WELLSPRING WAY BOISE ID 83713 | | 5851 N WEI BOISE ID | BRAD ROWEN 5851 N WELLSPRING WAY BOISE ID 83713 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Na | | | | or <u>new</u> neglet | | - Indicate: | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | MANAGER BRAD M ROWEN | | 5851 N WELLSPRING WAY | BOISE | ID | USA | 83713 | |
| 5. Organized Under the Laws of: ID W 77940 | | 6. Annual Report Signature: Brack Name (type or | | Date: 08/05/2015 Title: President | | | | |
| Processed 08/05/2015 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |