No. W 17373	1	Due no later than Dec 31, 2013	2. Registered /	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	400 NI MATN	CARLENA A LARSEN 400 N MAIN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	CARI'S HAIF	1. Mailing Address: Correct in this box if needed. CARI'S HAIR CARE & DAY SPA, LLC CARI A LARSEN 400 N MAIN HAILEY ID 83333 USA		HAILEY ID 83333			
NO FILING FEE IF RECEIVED BY DUE DATE	77 7777 77			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter	Names and Addres	sses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	R LARSEN A A LARSEN	400 N MAIN 400 N MAIN	HAILEY HAILEY	ID ID	USA USA	83333 83333	
5. Organized Under the Laws of: 6. Ann		ort must be signed.*					
ID	Signature:	Carlena Larsen		Date: 10/21/2013			
W 17373	Name (type	e or print): Carlena Larsen		Title: Owner			
Processed 10/21/2013	* Electronically	* Electronically provided signatures are accepted as original signatures.					