

|  |                     |  |           |   |         |                  |  |
|--|---------------------|--|-----------|---|---------|------------------|--|
| No. <b>W 67741</b>   |                     | <b>Due no later than Oct 31, 2013</b>  |           | 2. Registered Agent and Address <b>(NO PO BOX)</b>        |         |                  |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                     | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>GARDEN WORKS LLC<br>ALLISON LYNN HAKALA<br>144 DEER RIDGE RD<br>SANDPOINT ID 83864<br>USA |           | ALLISON HAKALA<br>144 DEER RIDGE RD<br>SANDPOINT ID 83864 |         |                  |  |
|  |                     |  |           | 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   | ALLISON LYNN HAKALA | 144 DEER RIDGE RD  | SANDPOINT | ID  | USA     | 83864            |  |
| 5. Organized Under the Laws of:  |                     | 6. Annual Report must be signed.*  |           |   |         |                  |  |
| <b>ID<br/>W 67741</b>  |                     | Signature: Allison Hakala  |           |   |         | Date: 08/13/2013 |  |
|  |                     | Name (type or print): Allison Hakala   |           |   |         | Title: Member    |  |
| Processed 08/13/2013   |                     | * Electronically provided signatures are accepted as original signatures.  |           |   |         |                  |  |