No. **W 93103**	**Due no later than May 31, 2012** **Annual Report Form**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** STITCHES & PETALS LLC KAREN S SCHARNHORST 1861 LITTLE BEAR RIDGE TROY ID 83871 USA	SAMUEL N SCHARNHORST 1861 LITTLE BEAR RIDGE TROY ID 83871 3. New 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
MANAGER	KAREN S SCHARNHORST	1861 LITTLE BEAR RIDGE	TROY	ID	USA	83871

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 93103**	Signature: Karen Scharnhorst	Date: 06/07/2012
	Name (type or print): Karen Scharnhorst	Title: Manager

Processed 06/07/2012

* Electronically provided signatures are accepted as original signatures.