

|                                                                                                                                                        |                   |                                                                                                                                                                        |        |                                                                             |         |                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------------------------------------------------------------------|---------|------------------|--|
| No. <b>W 117497</b>                                                                                                                                    |                   | <b>Due no later than Sep 30, 2015</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>TO THE GRAVE TATTOO GALLERY, LLC<br>MANDI J GUNDERSON<br>1815 W HONEYSUCKLE<br>HAYDEN ID 83835<br>USA |        | UNITED STATES CORPORATION AGEN<br>950 BANNOCK ST STE 1100<br>BOISE ID 83702 |         |                  |  |
|                                                                                                                                                        |                   |                                                                                                                                                                        |        | 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                                                                                                                                                 | MANDI J GUNDERSON | 1815 W HONEYSUCKLE                                                                                                                                                     | HAYDEN | ID                                                                          | USA     | 83835            |  |
| 5. Organized Under the Laws of:                                                                                                                        |                   | 6. Annual Report must be signed.*                                                                                                                                      |        |                                                                             |         |                  |  |
| <b>ID<br/>W 117497</b>                                                                                                                                 |                   | Signature: mandi j gunderson                                                                                                                                           |        |                                                                             |         | Date: 08/25/2015 |  |
|                                                                                                                                                        |                   | Name (type or print): mandi j gunderson                                                                                                                                |        |                                                                             |         | Title: owner     |  |
| Processed 08/25/2015                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                              |        |                                                                             |         |                  |  |