

|  |   |  |  |                                    |         |             |
|--|---|--|--|------------------------------------|---------|-------------|
| No. <b>W 90432</b>   | <b>Due no later than Feb 29, 2016</b><br><b>Annual Report Form</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>             |  | KARIE BROWN<br>2037 SOUTH GRADE RD<br>JULIAETTA ID 83535 |                                    |         |             |
|  | SPECIAL BIRTHS LLC<br>KARIE BROWN<br>PO BOX 231<br>JULIAETTA ID 83535 |  | 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 |
| MANAGER  | KARIE A BROWN   | 2037 SOUTH GRADE RD.   | JULIAETTA  | ID                                 | USA     | 83535       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 90432</b>   |   | 6. Annual Report must be signed.*<br>Signature: Karie A. Brown<br>Name (type or print): Karie A. Brown |  | Date: 01/05/2016<br>Title: Manager |         |             |
| Processed 01/05/2016   |   | * Electronically provided signatures are accepted as original signatures.                              |  |                                    |         |             |