No. <b>W 142595</b>		Due no later than Sep 30, 2016			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		SHANNON COYLE 4356 S ZAIVCLA AVE MERIDIAN ID 83642  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SHANNON DANIELLE DESIGNS LLC SHANNON BRAACH 4356 S ZAIVCLA AVE MERIDIAN ID 83642						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter N	ames and Addre	esses of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	4BER BUDDY BRAA		4356 S ZAIVCLA AVE		MERIDIAN	ID	USA	83642
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: shannon braach			Date: 10/20/2016			
W 142595		Name (type or print): shannon braach			Title: owner			
Processed 10/20/2016 * Electronically provided signatures are accepted as original signatures.								