No. C 194523		Due no later than Apr 30, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:		nnual Report Form	LYNETTE J BUSHMAN				
SECRETARY OF STATE	1. Mailing Add	1. Mailing Address: Correct in this box if needed.		3100 N LAKEHARBOR LANE 209 BOISE ID 83703			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LYNETTE J BUS	LJ SOURCING AGENCY INC LYNETTE J BUSHMAN 3100 N LAKEHARBOR LANE 209 BOISE ID 83703					
	209			3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	BOISE ID 8370						
4. Corporations: Enter Names and Bu	isiness Addresses of Pre	esident, Secretary, and Directors. Treasurer	(optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT LYNETTE J BUSHMAN		3100 N LAKEHARBOR LN SUITE 209 BOISE	BOISE	ID	USA	83703	
	T						
5. Organized Under the Laws of: 6. Annual Repo		rt must be signed.*					
ID	Signature: L BUS	Signature: L BUSHMAN Date: 03/03/2016					
C 194523	Name (type or p	Name (type or print): L BUSHMAN		Title: PRESIDENT			
Processed 03/03/2016	* Electronically prov	* Electronically provided signatures are accepted as original signatures.					