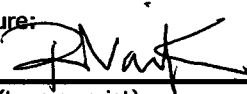


No. W 58446	Due no later than Jan 31, 2016 Annual Report Form	2. Registered Agent and Office (NOT A P.O. BOX) REBECCA VANKAMPEN 316 N HANSEN LN SHELLEY ID 83274																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MIA CONSULTING LLC BECCA VANKAMPEN 316 N HANSEN LN SHELLEY ID 83274	3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																					
<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Manager or Member</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or PO Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Country</th> <th style="text-align: left;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>RACHEL WINSTON</td> <td>316 N HANSEN LN</td> <td>SHELLEY ID</td> <td>USA</td> <td></td> <td>83274</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>REBECCA VANKAMPEN</td> <td>4059 E 73 N</td> <td>PLGBY ID</td> <td>USA</td> <td></td> <td>83442</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	RACHEL WINSTON	316 N HANSEN LN	SHELLEY ID	USA		83274	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	REBECCA VANKAMPEN	4059 E 73 N	PLGBY ID	USA		83442	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-size: 1.2em;"> IDAHO W 58446 </div>	6. Signature:  <hr/> Name (type or print): <div style="text-align: center; font-size: 1.1em;"> REBECCA VANKAMPEN </div>																																				
		Date: <u>1/5/16</u> <hr/> Title: <u>OWNER</u>																																			