| No. W 31845 | | Due no later than Jul 31, 2011 | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|----------------------|--|-------|---|---------|-------------|--|
| Return to: | | Annual Report Form | | RONALD J PHARIS | | | |
| SECRETARY OF STATE | 1. Mailing | 1. Mailing Address: Correct in this box if needed. STARLIGHT HERB COMPANY, L.L.C. RONALD J PHARIS PO BOX 140853 BOISE ID 83714-0853 USA | | 16296 N. ASBURY DR. NAMPA ID 83651 | | | |
| 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | RONALD J | | | NAMPA ID 63631 | | | |
| | BOISE ID | | | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: E | nter Names and Addre | sses of at least one Member or Manager. | | | | | |
| Office Held Name | е | Street or PO Address | City | State | Country | Postal Code | |
| | ENCE A PHARIS | 16296 N. ASBURY DR. | NAMPA | ID | USA | 83651 | |
| MANAGER RONA | ALD J PHARIS | 16296 N ASBURY | NAMPA | ID | USA | 83651 | |
| 5. Organized Under the Laws of | : 6. Annual Rep | 6. Annual Report must be signed.* | | | | | |
| ID | Signature: | Signature: R J Pharis | | Date: 05/25/2011 | | | |
| W 31845 | Name (type | Name (type or print): R J Pharis | | Title: Manager | | | |
| Processed 05/25/2011 | * Electronically | * Electronically provided signatures are accepted as original signatures. | | | | | |