No. W 130794		Due no later than Nov 30, 2014		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		AND ADDRESS OF THE PARTY OF THE	MANDI KINGHORN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. COMPLETE UPHOLSTERY LLC. MANDI KINGHORN 581 S PLEASANT VIEW RD POST FALLS ID 83854 581 S PLEASANT VIEW RD POST FALLS ID 83854 3. New Registered Agent Signature:*						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MANDI KINGHORN		HORN	581 S PLEASANT VIEW RD	POST FALLS	ID	USA	83854	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Ma		Date: 10/02/2014				
W 130794		Name (type o		Title: Owner				
Processed 10/02/2014 * Electronically provided signatures are accepted as original signatures.								