

No. W 71820	Due no later than Feb 28, 2013 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		SHAWNA K PHILLIPS 12930 ORCHARD AVE NAMPA ID 83651			
	BEARFOOT BARBER & BEAUTY LLC SHAWNA K PHILLIPS 12930 ORCHARD AVE NAMPA ID 83651		3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	SHAWNA K PHILLIPS	12930 ORCHARD AVE	NAMPA	ID	USA	83651
5. Organized Under the Laws of: ID W 71820		6. Annual Report must be signed.* Signature: ShawnaKPhillips Name (type or print): ShawnaKPhillips		Date: 01/12/2013 Title: Owner		
Processed 01/12/2013		* Electronically provided signatures are accepted as original signatures.				