No. **W 32456**	**Due no later than Aug 31, 2012** **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.** WESTERN SKIES HANDMADE SOAP COMPANY, LLC SUSAN M. OLIVERSON 2564 E ONIEDA PRESTON ID 83263	SUSAN M OLIVERSON 2564 E ONIEDA PRESTON ID 83263 3. New 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
MANAGER	SUSAN M OLIVERSON	2564 E ONIEDA	PRESTON	ID	USA	83263

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 32456**	Signature: Susan M Oliverson Name (type or print): Susan M Oliverson	Date: 08/31/2012 Title: Manager

Processed 08/31/2012

* Electronically provided signatures are accepted as original signatures.