

No. <b>W 177163</b>		<b>Due no later than Jan 31, 2018</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  EYECANDY LASH LOUNGE, LLC NICOLE INSLEY 745 HUBBARD AVE POCATELLO ID 83201		NICOLE INSLEY 745 HUBBARD AVE POCATELLO ID 83201-8320			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name NICOLE MARIE INSLEY	Street or PO Address 745 HUBBARD		City POCATELLO	State ID	Country USA	Postal Code 83201
5. Organized Under the Laws of:  <b>ID</b> <b>W 177163</b>		6. Annual Report must be signed.*  Signature: nicole insley Name (type or print): nicole insley  Date: 02/26/2018 Title: owner					
Processed 02/26/2018 * Electronically provided signatures are accepted as original signatures.							