

|                                                                                                                                                        |                 |                                                                                                                                                              |       |                                                           |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------------|---------|-------------|--|
| No. <b>W 78012</b>                                                                                                                                     |                 | <b>Due no later than Sep 30, 2014</b>                                                                                                                        |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>        |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br><br>PHOTOGRAPHY BY JENNILYN L.L.C.<br>JENNILYN PARISH<br>232 N TURTLEDOVE WAY<br>NAMPA ID 83651 |       | JENNILYN PARISH<br>232 N TURTLEDOVE WAY<br>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 |  |
| MANAGER                                                                                                                                                | JENNILYN PARISH | 232 N TURTLEDOVE WAY                                                                                                                                         | NAMPA | ID                                                        | USA     | 83651       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 78012</b>                                                                                           |                 | 6. Annual Report must be signed.*<br>Signature: Jennilyn Parish<br>Name (type or print): Jennilyn Parish                                                     |       |                                                           |         |             |  |
|                                                                                                                                                        |                 | Date: 09/28/2014<br>Title: Owner/Manager                                                                                                                     |       |                                                           |         |             |  |
| Processed 09/28/2014                                                                                                                                   |                 | * Electronically provided signatures are accepted as original signatures.                                                                                    |       |                                                           |         |             |  |