No. **W 42547**	**Due no later than Sep 30, 2018** **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.** PERSONAL TOUCH PLUS CLEANING L.L.C. HOLLI SPEARS 2102 S. DERRING PL. BOISE ID 83709	HOLLI SPEARS 2102 S. DERRING PL. BOISE ID 83709 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
MEMBER	HOLLI SPEARS	2102 S. DERRING PL	BOISE	ID		83709
MANAGER	BRYCE SPEARS	2102 S. DERRING PL	BOISE	ID		83709
MANAGER	WILLIAM SPEARS	10905 W. SMOKE RANCH DR	BOISE	ID	USA	83709

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 42547**	Signature: Bryce Spears	Date: 07/28/2018
	Name (type or print): Bryce Spears	Title: Owner/Operator

Processed 07/28/2018

* Electronically provided signatures are accepted as original signatures.