| No. <b>W 87445</b>  |          | Due no later than Oct 31, 2016   |                          |   | 2. Registered Agent and Address (NO PO BOX)  |              |           |             |
|---|----------|--|--------------------------|---|--|--------------|-----------|-------------|
| Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 |          | Annual Report Form  1. Mailing Address: Correct in this box if needed.  TWISTED EWE LLC (THE) 800 WEST MAIN STREET SUITE 1300 BOISE ID 83702 |                          | _ | AMBER R MYRICK 800 WEST MAIN STREET STE 1300 BOISE ID 83702  3. New Registered Agent Signature:* |              |           |             |
| NO FILING FEE IF RECEIVED BY DUE DATE  4. Limited Liability Companies: Enter Nar    |          |  |                          |   | o. <u>item</u> register  | cu rigelle 3 | ignacare. |             |
|   | ame      |  | Street or PO Address     |   | City   | State        | Country   | Postal Code |
| MANAGER CA  | AROLYN L | PARKINSON  | 4016 W. SUGAR TREE DRIVE |   | MERIDIAN   | ID           | USA       | 83646       |
| 5. Organized Under the Laws of:  ID  W 87445  |          | 6. Annual Report must be signed.* Signature: Carolyn L. Parkinson  |                          |   | Date: 09/22/2016   |              |           |             |
|   |          | Name (type or print): Carolyn L. Parkinson  * Electronically provided signatures are accepted as original signatures.                        |                          |   |  |              |           |             |