

No. W 114922	Due no later than Jun 30, 2014 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. DROP OF CALM, LLC ELISHA FAWKES 2025 S CANDLEWOOD DR NAMPA ID 83686		ELISHA BOVARD 2025 S CANDLEWOOD DR NAMPA ID 83686			
			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	ELISHA MINETTE FAWKES	2025 S CANDLEWOOD DR	NAMPA	ID	USA	83686
MEMBER	CALEB AXEL FAWKES	2025 S CANDLEWOOD DR	NAMPA	ID	USA	83686
5. Organized Under the Laws of: ID W 114922	6. Annual Report must be signed.* Signature: Elisha Fawkes Name (type or print): Elisha Fawkes		Date: 04/13/2014 Title: Manager			
Processed 04/13/2014		* Electronically provided signatures are accepted as original signatures.				