No. <b>C 176484</b>	Due no later than Dec 31, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		KARI KNOTTS				
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.		W. 1000 W. 1000 W. 100	547 S FITNESS PL SUITE 100 EAGLE 83616			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	PO BOX 83720 EAGLE SALON, INC.		EAGLE 6				
			3. New Registered Agent Signature:*				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held Name	Stre	et or PO Address	City	State	Country	Postal Code	
PRESIDENT KARI K KNOTTS		S FITNESS PL SUITE 100	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:  6. Annual Report must be signed.*							
ID Signature: Kari Knotts			Date: 02/25/2015				
C 176484	Name (type or print): Kari Knotts		Title: President				
Processed 02/25/2015	* Electronically provided signatures are accepted as original signatures.						