

|                                                                                                                                                        |                     |                                                                               |        |                                                    |                  |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------------|--------|----------------------------------------------------|------------------|-------------|--|
| No. <b>W 80697</b>                                                                                                                                     |                     | <b>Due no later than Jan 31, 2012</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>Annual Report Form</b>                                                     |        | LEAH MCKINNIES<br>3660 MILL RD<br>EMMETT ID 83617  |                  |             |  |
|                                                                                                                                                        |                     | <b>1. Mailing Address: Correct in this box if needed.</b>                     |        | 3. <u>New</u> Registered Agent Signature:*         |                  |             |  |
|                                                                                                                                                        |                     | FITLEAH.COM LLC<br>LEAH L MCKINNIES<br>3660 MILL RD<br>EMMETT ID 83617<br>USA |        |                                                    |                  |             |  |
| 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                                                                                                                                                 | RICHARD S MCKINNIES | 3660 MILL RD                                                                  | EMMETT | ID                                                 | USA              | 83617       |  |
| MEMBER                                                                                                                                                 | LEAH L MCKINNIES    | 3660 MILL RD                                                                  | EMMETT | ID                                                 | USA              | 83617       |  |
| 5. Organized Under the Laws of:                                                                                                                        |                     | 6. Annual Report must be signed.*                                             |        |                                                    |                  |             |  |
| <b>ID<br/>W 80697</b>                                                                                                                                  |                     | Signature: Leah McKinnies                                                     |        |                                                    | Date: 02/27/2012 |             |  |
|                                                                                                                                                        |                     | Name (type or print): Leah McKinnies                                          |        |                                                    | Title: Member    |             |  |
| Processed 02/27/2012                                                                                                                                   |                     | * Electronically provided signatures are accepted as original signatures.     |        |                                                    |                  |             |  |