| No. W 84837 | Due no later than Jun 30, 2011 | 2. Registered Agent and Office (NOT A P.O. BOX) |
|--|--|---|
| Return to: | Annual Report Form | KATHY M MEZIN |
| SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | Mailing Address: Correct in this box if needed. KATHY'S SHOW TACK, LLC. | 11325 S CLOVERDALE RD KUNA ID 83634 |
| | 11325 S CLOVERDALE RD KUNA ID 83634 | 3. New Registered Agent Signature. |
| 4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. | | |
| Manager or Member Nam | e Street or PO Address | City State Country Postal Code |
| Manager Member (circle one) Kathy Mezin | 11325 S. Cloverdale | Rd, Kuna, ID USA 83634 |
| 5. Organized Under the Laws of IDAHO W 84837 | f: 6. Signature: Father For | _{Date:} 4-16-11 |
| | Name (type or print): Kathy Mezin | Title: Manager |
| Issued 04/15/2011 by DK1 | | 118828 |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.**