

No. W 96025		Due no later than Aug 31, 2011 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		1. Mailing Address: Correct in this box if needed. WRAP DR. LLC MARY LLOYD 1393 W DEADWOOD CT EAGLE ID 83616		JEFF LLOYD 1393 W DEADWOOD CT EAGLE ID 83616			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name MARY LLOYD	Street or PO Address 1393 WEST DEADWOOD COURT		City EAGLE ID	State ID	Country USA	Postal Code 83616
5. Organized Under the Laws of: ID W 96025		6. Annual Report must be signed.* Signature: Mary Lloyd Name (type or print): Mary Lloyd Date: 09/16/2011 Title: Co-Owner					
Processed 09/16/2011 * Electronically provided signatures are accepted as original signatures.							