

|  |                |  |          |   |                     |
|--|----------------|--|----------|---|---------------------|
| No. <b>W 87176</b>   |                | <b>Due no later than Sep 30, 2011</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>1. Mailing Address: Correct in this box if needed.</b><br><br>SPOKANE BATH SYSTEMS LLC<br>SPENCER D SHAW<br>2150 E FAIRVIEW AVE STE 150<br>MERIDIAN ID 83642<br>USA |          | GIVENS PURSLEY CORPORATE SERVI<br>601 W BANNOCK ST<br>BOISE ID 83702<br>USA |                     |
|  |                |  |          | 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  | SPENCER D SHAW | 2150 E FAIRVIEW AVE STE 150  | MERIDIAN | ID  | USA 83642           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 87176</b>   |                | 6. Annual Report must be signed.*<br>Signature: Spencer Shaw<br>Name (type or print): Spencer Shaw<br>Date: 07/14/2011<br>Title: Owner/manager                         |          |   |                     |
| Processed 07/14/2011   |                | * Electronically provided signatures are accepted as original signatures.  |          |   |                     |