

No. W 44315	Due no later than November 30, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX													
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable		LIESL MILAN 2450 E BERGESON ST BOISE, ID 83708													
NO FILING FEE IF RECEIVED BY DUE DATE	BASKING IMPRESSIONS GIFT BASKETS LL LIESL MILAN 3636 BURKE AVE 2304 E Independence Dr BOISE, ID 83708 83706		3. New Registered Agent Signature													
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Liesl Milan</td> <td>2304 E Independence Dr</td> <td>Boise</td> <td>ID</td> <td>83706</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	Owner	Liesl Milan	2304 E Independence Dr	Boise	ID	83706
Office held	Name	Street or P.O. Address	City	State	Zip											
Owner	Liesl Milan	2304 E Independence Dr	Boise	ID	83706											
5. Organized Under the Laws of: IDAHO W 44315		6. Signature <u>Liesl Milan</u> Date <u>9/14/08</u> Name (Typed or Printed) <u>Liesl Milan</u> Title <u>Owner</u>														

Issued 09/02/2008

Do Not Tape or Staple

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