No. <b>W 146985</b>		Due no later than Jan 31, 2017					
Return to:		Annual Report Form	10 000000000000000000000000000000000000	ALYSE BUTLER 10500 SHIELDS AVE BOISE ID 83714  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  NO-NONSENSE NATURALS LLC  ALYSE BUTLER  10500 SHIELDS AVE  BOISE ID 83714	BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Comp	anies: Enter Nai	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER ALYSE BUTL		ER 10500 SHIELDS AVE	BOISE	ID	USA	83714	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Alyse Butler		Date: 02/20/2017			
W 146985		Name (type or print): Alyse Butler		Title: Owner			
Processed 02/20/2017 * Electronically provided signatures are accepted as original signatures.							