

|  |                |   |        |  |                     |
|--|----------------|---|--------|--|---------------------|
| No. <b>W 13102</b>   |                | <b>Due no later than Oct 31, 2017</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br>EXPRESS NAME TAGS & MORE, LC<br>KIMBERLY J COX<br>4116 3 MILE RD<br>WEIPPE ID 83553 |        | KIMBERLY COX<br>4116 3 MILE RD<br>WEIPPE ID 83553  |                     |
|  |                |   |        | 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 |
| MEMBER   | BEVERLY BAILEY | 4118 3 MILE RD  | WEIPPE | ID   | 83553               |
| MEMBER   | KIMBERLY COX   | 4116 3 MILE RD  | WEIPPE | ID   | 83553               |
| MEMBER   | TOBIAS COX     | 4116 3 MILE RD  | WEIPPE | ID   | 83553               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 13102</b>   |                | 6. Annual Report must be signed.*<br>Signature: Kimberly J. Cox<br>Name (type or print): Kimberly J. Cox<br>Date: 10/10/2017<br>Title: Secretary/Owner                            |        |  |                     |
| Processed 10/10/2017   |                | * Electronically provided signatures are accepted as original signatures.   |        |  |                     |