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|--|------------------|---|----------|--|---------|-------------|--|
| No. W 23066 | | Due no later than Mar 31, 2013 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. COFFEE COW LLC SHARLA K. HUBBARD 1441 G ST LEWISTON ID 83501 | | SHARLA HUBBARD 1441 G ST LEWISTON ID 83501 | | | |
| | | | | 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 | SHARLA K HUBBARD | 447 CRESTLINE CIRCLE DR | LEWISTON | ID | USA | 83501 | |
| 5. Organized Under the Laws of: ID W 23066 | | 6. Annual Report must be signed.* Signature: Sharla Hubbard Name (type or print): Sharla Hubbard Date: 03/19/2013 Title: Member | | | | | |
| Processed 03/19/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |