No. W 186898 Return to:		Due no later than Jul 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. BO'S BARBERING, LLC BO H BROGAN 1240 ADA AVE IDAHO FALLS ID 83402 USA		2. Registered Agent and Address (NO PO BOX) BRIAN CORNELISON				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					2015 IRENE LN IDAHO FALLS ID 83404-8340 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Com	ıpanies: Enter Naı	mes and Addresses	of at least one Member or Manager	•				
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	ANAGER BO H BROGAN		1240 ADA AVE		IDAHO FALLS	ID	USA	8340
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Bo Brogan			Date: 06/06/2018			
W 186898		Name (type or print): Bo Brogan			Title: Manager			
Processed 06/06/2018 * Electronically provided signatures are accepted as original signatures.								