

No. W 155914	Due no later than Sep 30, 2017 Annual Report Form	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	1. Mailing Address: Correct in this box if needed. ALLISON'S FORMAL DRESSES, LLC PO BOX 426 LEWISTON ID 83501	ALLISON M SWOBODA 1327 18TH ST LEWISTON ID 83501-8350				
		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
MANAGER	ALLISON M SWOBODA	1327 18TH ST	LEWISTON	ID	USA	83501
5. Organized Under the Laws of: ID W 155914	6. Annual Report must be signed.* Signature: Allison M. Swoboda Name (type or print): Allison M. Swoboda Date: 09/21/2017 Title: Owner					
Processed 09/21/2017		* Electronically provided signatures are accepted as original signatures.				