No. W 26565		Due no later than Oct 31, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. JIVA SALON LLC PO BOX 324 KETCHUM ID 83340-0324		2	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					CONNIE LOVE 640 WHITETAIL DR HAILEY ID 83333 3. New Registered Agent Signature:*			
4. Limited Liability Compa		 mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	MEMBER CONNIE M LOVE		640 WHITETAIL DR		HAILEY	ID	USA	83333
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 26565		Signature: Connie love			Date: 10/26/2015			
		Name (type or print): Connie love			Title: Owner			
* Electronically provided signatures are accepted as original signatures.								