

|  |                |  |       |   |         |                  |  |
|--|----------------|--|-------|---|---------|------------------|--|
| No. <b>W 110911</b>  |                | <b>Due no later than Feb 28, 2013</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>1. Mailing Address: Correct in this box if needed.</b><br>INSPIRED CHARM, LLC<br>AMY HOPE BONAR<br>4229 N GINZEL ST<br>BOISE ID 83703-4213<br>USA |       | AMY HOPE BONAR<br>4229 N GINZEL ST<br>BOISE ID 83703-4213 |         |                  |  |
|  |                |  |       | 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  | AMY HOPE BONAR | 4229 N. GINZEL STREET  | BOISE | ID  | USA     | 83703-4213       |  |
| 5. Organized Under the Laws of:  |                | 6. Annual Report must be signed.*  |       |   |         |                  |  |
| <b>ID<br/>W 110911</b>   |                | Signature: Amy Hope Bonar  |       |   |         | Date: 01/06/2013 |  |
|  |                | Name (type or print): Amy Hope Bonar   |       |   |         | Title: Manager   |  |
| Processed 01/06/2013   |                | * Electronically provided signatures are accepted as original signatures.  |       |   |         |                  |  |