

No. W 56873		Due no later than Dec 31, 2011		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. TWO TAILS, LLC SALLY NIHIPALI 4503 FEDERAL WAY BOISE ID 83716 USA		SALLY A NIHIPALI 4503 FEDERAL WAY BOISE ID 83716			
				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	SALLY A NIHIPALI	5403 FEDERAL WAY	BOISE	ID	USA	83716	
MEMBER	PAUL M NIHIPALI	5403 FEDERAL WAY	BOISE	ID	USA	83716	
5. Organized Under the Laws of: ID W 56873		6. Annual Report must be signed.* Signature: Sally A. Nihipali Name (type or print): Sally A. Nihipali Date: 10/10/2011 Title: Member Manager					
Processed 10/10/2011		* Electronically provided signatures are accepted as original signatures.					