

No. W 76556		Due no later than Aug 31, 2012		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. NATURAL HERBS AND SUPPLIES, LLC [object HTMLInputElement] E CLIMER PO BOX 71 PINGREE ID 83262		JAMES E CLIMER 927 S 1950 W SPRINGFIELD ID 83277	
				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	WILLIAM JT CLIMER	6241 DOGWOOD RD SE	PORT ORCHARD,	WA	USA 98367
5. Organized Under the Laws of:		6. Annual Report must be signed.*			
ID W 76556		Signature: James E. Climer Name (type or print): James E. Climer		Date: 10/06/2012 Title: Partner	
Processed 10/06/2012		* Electronically provided signatures are accepted as original signatures.			