

No. W 48039		Due no later than Mar 31, 2016 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		1. Mailing Address: Correct in this box if needed. BLIND OBSESSION, LLC DEBRA A LAYMAN 5164 BANNOCK HWY POCATELLO ID 83204-4506		DEBRA A LAYMAN 5164 BANNOCK HWY POCATELLO ID 83204-4506			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name DEBRA A LAYMAN	Street or PO Address 5164 BANNOCK HWY		City POCATELLO	State ID	Country	Postal Code 83204-4506
5. Organized Under the Laws of: ID W 48039		6. Annual Report must be signed.* Signature: Debra A. Layman Name (type or print): Debra A. Layman Date: 01/26/2016 Title: Owner					
Processed 01/26/2016 * Electronically provided signatures are accepted as original signatures.							