No. W 63332		Due no later than Jun 30, 2012		2. Register	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		NANCY	NANCY E HALLOWELL			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PERFECT CUP, LLC (THE) NANCY E HALLOWELL PO BOX 466 FAIRFIELD ID 83327-0466		FAIRFIE	326B N 400 W FAIRFIELD ID 83327 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	ınies: Enter Naı	mes and Addresses	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	NANCY E H	ALLOWELL	PO BOX 466	FAIRFIELL) ID	USA	83327-0466	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Nancy Hallowell			Date: 04/16/2012			
W 63332		Name (type or		Title: Owner				
Processed 04/16/2012 * Electronically provided signatures are accepted as original signatures.								