No. <b>W 61910</b>		Due no later than Apr 30, 2013	2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	JASON LEWIS 819 HWY 2 STE 214 SANDPOINT ID 83864  3. New Registered Agent Signature:*				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  CUTTING EDGE TILE AND STONE LLC  JASON LEWIS  819 HWY 2 STE 214  SANDPOINT ID 83864					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Comp	oanies: Enter Nar	nes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER JASON LEWI		IS 819 HIGHWAY 2 SUITE 214	SANDPOINT	ID	USA	83864	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: Jason Lewis	Date: 02/24/2013				
W 61910		Name (type or print): Jason Lewis	Title: Owner				
Processed 02/24/2013 * Electronically provided signatures are accepted as original signatures.							