No. W 83793		Due no later than May 31, 2012		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. ORIGINAL WOMAN LLC EVELYN GIMMEL 6620 MORTON DR BOISE ID 83704 USA		71	EVELYN GIMMEL 6620 MORTON DR BOISE ID 83704 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Comp	anies: Enter Na	mes and Addresses of a	t least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER EVELYN GIMMEL		IMEL	6620 MORTON DR		BOISE	ID	USA	83704
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 83793		Signature: Evelyn Gimmel			Date: 03/14/2012			
		Name (type or print): Evelyn Gimmel			Title: Owner			
Processed 03/14/2012 * Electronically provided signatures are accepted as original signatures.								