

|  |   |   |   |       |         |             |
|--|---|---|---|-------|---------|-------------|
| No. <b>W 147712</b>  | <b>Due no later than Feb 29, 2016</b><br><b>Annual Report Form</b>                  |   | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |       |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b>                           |   | MARY SIMMONS<br>1125 W ODESSA CT<br>NAMPA ID 83686-8368 |       |         |             |
|  | MARY SIMMONS PHOTOGRAPHY, LLC<br>MARY SIMMONS<br>1125 W ODESSA CT<br>NAMPA ID 83686 |   | 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 |
| MANAGER  | MARY SIMMONS  | 1125 W ODESSA CT  | NAMPA   | ID    | USA     | 83686       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 147712</b>  | 6. Annual Report must be signed.*   |   |   |       |         |             |
|  |   | Signature: Mary Simmons   | Date: 01/04/2016  |       |         |             |
|  |   | Name (type or print): Mary Simmons  | Title: Owner  |       |         |             |
| Processed 01/04/2016   |   | * Electronically provided signatures are accepted as original signatures. |   |       |         |             |