

|                                                                                                                                                        |                   |                                                                                                                                                                                           |          |                                                                 |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------------|---------|-------------|--|
| No. <b>W 159422</b>                                                                                                                                    |                   | <b>Due no later than Dec 31, 2016</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>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>AN ELEGANT LEMON LLC<br>JACQULINE BERNIER<br>2649 E DECAMERON LANE<br>MERIDIAN ID 83642 |          | JACQULINE BERNIER<br>2649 E DECAMERON LANE<br>MERIDIAN ID 83642 |         |             |  |
|                                                                                                                                                        |                   |                                                                                                                                                                                           |          | 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 |  |
| MEMBER                                                                                                                                                 | JACQULINE BERNIER | 2649 E DECAMERON LANE                                                                                                                                                                     | MERIDIAN | ID                                                              | USA     | 83642       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 159422</b>                                                                                          |                   | 6. Annual Report must be signed.*<br>Signature: Jacqueline Bernier<br>Name (type or print): Jacqueline Bernier<br>Date: 10/28/2016<br>Title: Owner                                        |          |                                                                 |         |             |  |
| Processed 10/28/2016                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                                 |          |                                                                 |         |             |  |