

No. W 13203	Due no later than Oct 31, 2010 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) PAMELA JOHNSON 6890 FAIRVIEW AVE BOISE ID 83704	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HAIR ATELIER, L.L.C. 4766 JAGUAR AVE BOISE ID 83713		3. <u>New</u> Registered Agent Signature.	
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. Office Held Name Street or PO Address City State Country Postal Code <i>Manager Pamela Johnson 6890 Fairview Boise Id USA 83713</i>				
5. Organized Under the Laws of: IDAHO W 13203		6. Signature: <i>Pamela Johnson</i> Date: <i>10-18-2010</i> Name (type or print): <i>Pamela Johnson</i> Title: <i>Manager</i>		
Issued 08/23/2010 by JLI			104538	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM