No. W 171261		Due no later than Aug 31, 2018		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. AMANDA FROST BEAUTY LLC AMANDA FROST 615 BRENT ST POCATELLO ID 83201 USA		AMANDA FROST 615 BRENT ST POCATELLO ID 83201				
					3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER AMANDA FRO		ROST	615 BRENT ST.		POCATELLO	ID	USA	83201
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Amanda Frost		Date: 09/04/2018				
W 171261		Name (type or print): Amanda Frost			Title: Owner			
Processed 09/04/2018 * Electronically provided signatures are accepted as original signatures.								