

No. W 74763		Due no later than May 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 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. DOUBLE TAKE HAIR DESIGNS LLC AMANDA RIFE 4757 TETON ST. CHUBBUCK ID 83202		AMANDA RIFE 4757 TETON ST. CHUBBUCK ID 83202	
				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	AMANDA RIFE	4757 TETON ST.	CHUBBUCK	ID	83202
MEMBER	JACOB RIFE	4757 TETON ST.	CHUBBUCK	ID	83202
5. Organized Under the Laws of: ID W 74763		6. Annual Report must be signed.* Signature: Amanda Rife Name (type or print): Amanda Rife Date: 03/22/2018 Title: Owner			
Processed 03/22/2018		* Electronically provided signatures are accepted as original signatures.			