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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------------------------|---------------------|
| No. <b>W 147895</b>                                                                                                                                    |                       | <b>Due no later than Feb 28, 2018</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>OHMYGAIA LLC<br>WENDY HARRIS-CARTER<br>2791 W VERSAILLES DR<br>COEUR D'ALENE ID 83815 |               | WENDY HARRIS-CARTER<br>2791 W VERSAILLES DR<br>COEUR D'ALENE ID 83815-8381 |                     |
|                                                                                                                                                        |                       |                                                                                                                                                                                         |               | 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                                                                                                                                                | WENDY J HARRIS-CARTER | 2791 W VERSAILLES DR                                                                                                                                                                    | COEUR D'ALENE | ID                                                                         | USA 83815           |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 147895</b>                                                                                          |                       | 6. Annual Report must be signed.*<br>Signature: wendy harris-carter<br>Name (type or print): wendy harris-carter<br>Date: 01/22/2018<br>Title: owner                                    |               |                                                                            |                     |
| Processed 01/22/2018                                                                                                                                   |                       | * Electronically provided signatures are accepted as original signatures.                                                                                                               |               |                                                                            |                     |