No. W 190185		Due no later than Oct 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. UPPER ROOM LOUISE K LARSEN LLC (THE) LOUISE K LARSEN 403 6TH AVE SO NAMPA ID 83651		LOUISE K LARSEN 403 6TH AVE SO NAMPA ID 83651-8365				
NO FILING FEE IF RECEIVED BY DUE DATE					3. <u>New</u> Registered Agent Signature:*			
200		nes and Addresses of	at least one Member or Manager.		Cib	Ctata	Country	Doctal Code
Office Held MANAGER	Name LOUISE K. L	ADCEN	Street or PO Address 403 6TH AVE SOUTH		City NAMPA	State ID	Country USA	Postal Code 83651
					IVALTIFA		03A	03031
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Louise K. Larsen			Date: 08/20/2018			
W 190185		Name (type or print): Louise K. Larsen			Title: LMT			
Processed 08/20/2018 * Electronically provided signatures are accepted as original signatures.								