

No. W 136624		Due no later than Apr 30, 2016 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. KRISTIE LEMMON, LLC KRISTIE LEMMON 19593 MADISON RD NAMPA ID 83687		JIM BLAKE 19593 MADISON RD NAMPA ID 83687-9950			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name KRISTIE LEMMON	Street or PO Address 205 EAST DIMOND BLVD #820		City ANCHORAGE	State AK	Country USA	Postal Code 99515
5. Organized Under the Laws of: ID W 136624		6. Annual Report must be signed.* Signature: kristie lemmmon Name (type or print): kristie lemmmon Date: 03/07/2016 Title: CEO					
Processed 03/07/2016 * Electronically provided signatures are accepted as original signatures.							