

No. <b>W 31253</b>		<b>Due no later than Jun 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )		
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  GOURMET TWIST LLC JARED BIETHMAN 2817 S WHITE CASTLE EAGLE ID 83616 USA		JARED BIETHMAN 2817 S WHITE CASTLE AVE EAGLE ID 83616		
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*		
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MEMBER	Name JARED BIETHMAN	Street or PO Address 673 W BANKSIDE DR	City EAGLE	State ID	Country	Postal Code 83616
5. Organized Under the Laws of:  <b>NV</b> <b>W 31253</b>	6. Annual Report must be signed.*  Signature: Jared Biethman Name (type or print): Jared Biethman					Date: 05/06/2015 Title: member
Processed 05/06/2015 * Electronically provided signatures are accepted as original signatures.						