| No. W 131839 | | Due no later than Dec 31, 2015 | | 2. Registered Ag | 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. SOLAR NAILS AND SPA LLC BUU T LE 1000 POCATELLO CREEK RD STE E-1 POCATELLO ID 83201 | | STE E-1 POCATELLO | 1000 POCATELLO CREEK RD | | | |
| 1 | | nes and Addresses | of at least one Member or Manager. | | | | | |
| Office Held | Name | nes and made esses | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER BUU SOLAR | | NAILS & SPA | 1000 POCATELLO CREEK RD E-1 | POCATELLO | ID | USA | 83201 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* Signature: buu t le Date: 01/19/2016 | | | | | | |
| W 131839 | | Name (type or print): buu t le | | Title: manager | | | | |
| Processed 01/19/2016 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |