

No. W 64321		Due no later than Jul 31, 2015		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		1. Mailing Address: Correct in this box if needed. CYA HOSPITAL GOWNS, LLC GARRETT B. KERR 2094 N. TRAIL CREEK LN. EAGLE ID 83616 USA		SCOTT P VANCE 2094 N. TRAIL CREEK LN. EAGLE ID 83616			
				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	
MEMBER	GARRETT KERR	2094 N. TRAIL CREEK LN.	EAGLE	ID	USA	83616	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID W 64321		Signature: Garrett Kerr				Date: 07/21/2015	
		Name (type or print): Garrett Kerr				Title: Owner	
Processed 07/21/2015		* Electronically provided signatures are accepted as original signatures.					