No. <b>W 44446</b>		Due no later than Nov 30, 2012		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		VALERIE R	VALERIE ROE			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  VALERIE ROE ESTHETICS, L.L.C.  VALERIE WEINREICH  2737 E MOKENA DR  BOISE ID 83716		BOISE ID	2737 E MOKENA DR. BOISE ID 83716  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Compa	nies: Enter Na	mes and Addresse	es of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER VALERIE WEINR		EINREICH	5065 E GERANIUM ST.	BOISE	ID	USA	83716	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 44446		Signature: Va		Date: 09/21/2012				
		Name (type o	r print): Valerie Weinreich		Title: Manager			
Processed 09/21/2012 * Electronically provided signatures are accepted as original signatures.								