

No. W 39821		Due no later than May 31, 2014 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. SCRAPPIN GIRLFRIENDS ON MAIN LLC LISA P FAIRBANKS 123 MAIN AVE EAST TWIN FALLS ID 83301		LISA FAIRBANKS 123 MAIN AVE EAST TWIN FALLS ID 83301			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	LISA FAIRBANKS	1154 JUNIPER ST N	TWIN FALLS	ID	USA	83301	
MANAGER	LISA FAIRBANKS	1154 JUNIPER ST. N.	TWIN FALLS	ID	USA	83301	
5. Organized Under the Laws of: ID W 39821		6. Annual Report must be signed.* Signature: Lisa Fairbanks Name (type or print): Lisa Fairbanks					
		Date: 05/22/2014 Title: Owner					
Processed 05/22/2014 * Electronically provided signatures are accepted as original signatures.							