

|  |               |   |       |  |                  |             |  |
|--|---------------|---|-------|--|------------------|-------------|--|
| No. <b>W 57929</b>   |               | <b>Due no later than Jan 31, 2010</b>   |       | 2. Registered Agent and Address <b>(NO PO BOX)</b>     |                  |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |               | <b>Annual Report Form</b>   |       | MICHELE BAKER<br>624 N CLEARPOINT WY<br>EAGLE ID 83616 |                  |             |  |
|  |               | <b>1. Mailing Address: Correct in this box if needed.</b>                         |       | 3. <u>New</u> Registered Agent Signature:*             |                  |             |  |
|  |               | DESIGNS BY MICHELE, LLC<br>MICHELE BAKER<br>624 N CLEARPOINT WY<br>EAGLE ID 83616 |       |  |                  |             |  |
| 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   | MICHELE BAKER | 624 N CLEARPOINT WY   | EAGLE | ID   | USA              | 83616       |  |
| MEMBER   | BARRY BAKER   | 624 N CLEARPOINT WY   | EAGLE | ID   | USA              | 83616       |  |
| 5. Organized Under the Laws of:  |               | 6. Annual Report must be signed.*   |       |  |                  |             |  |
| <b>ID<br/>W 57929</b>  |               | Signature: Michele Baker  |       |  | Date: 02/11/2010 |             |  |
|  |               | Name (type or print): Michele Baker   |       |  | Title: Member    |             |  |
| Processed 02/11/2010   |               | * Electronically provided signatures are accepted as original signatures.         |       |  |                  |             |  |