

ISSUED: 07-03-1994

No: 221	Idaho Limited Liability Company Annual Report Form		2. Registered Agent and Office NOT											
Return To Secretary of State Room 203, Statehouse P.O. BOX 83720 Boise, ID 83720-0080 ★ FIRST NOTICE ★ NO FEE REQUIRED	Due No Later Than November 1, 1994		SHANNON T THARP 1409 GARLAND											
	1. Mailing Address — KOOL COVES N' KLOTHES LTD. COMP SHANNON T THARP 1409 GARLAND		NAMPA ID 83686											
	NAMPA ID 83686		3. Organized Under The Laws of ID NO: 221											
4. Names and Addresses of <input type="checkbox"/> Managers or <input checked="" type="checkbox"/> Members (check one)														
MUST BE PRINTED OR TYPED														
<table border="0" style="width: 100%;"> <tr> <td style="text-align: center;"><u>Name</u></td> <td style="text-align: center;"><u>Street or P.O. Address</u></td> <td style="text-align: center;"><u>City</u></td> <td style="text-align: center;"><u>State</u></td> <td style="text-align: center;"><u>Zip</u></td> </tr> <tr> <td>SHANNON T. THARP</td> <td>1409 GARLAND</td> <td>Nampa</td> <td>Idaho</td> <td>83686</td> </tr> </table>					<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	SHANNON T. THARP	1409 GARLAND	Nampa	Idaho	83686
<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>										
SHANNON T. THARP	1409 GARLAND	Nampa	Idaho	83686										
5. Signature of the Current Registered Agent (if changed in block 2) _____		6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Shannon T. Tharp</u> Date <u>7-11-94</u> Name <small>(Typed or Printed)</small> <u>SHANNON T. THARP</u>												