

No. <b>C 152205</b>		Due no later than Dec 31, 2016 <b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  SHE, INC. WILLA ROSE 8894 W MARTHA AVE OASIS ID 83647		WILLA ROSE 8894 W MARTHA AVE OASIS ID 83647		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	WILLA ROSE	8894 W MARTHA AVE	OASIS	ID	USA	83647
SECRETARY	ALYSSA LAJOIE	3797 N CROFT WAY	EAGLE	ID	USA	83616
TREASURER	JOSEPH P MORISETTE	107 S KIMBALL SUITE 225	CALDWELL	ID	USA	83605
DIRECTOR	DEENA M LAJOIE	3797 N CROFT WAY	EAGLE	ID	USA	83616
DIRECTOR	TIFFANY GRACE	3500 N LINDER RD	EAGLE	ID	USA	83616
5. Organized Under the Laws of:  <b>ID C 152205</b>		6. Annual Report must be signed.*  Signature: Willa Rose Name (type or print): Willa Rose  Date: 12/31/2016 Title: President				
Processed 12/31/2016		* Electronically provided signatures are accepted as original signatures.				