

No. W 87820		Due no later than Oct 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. FLORA BAILEY, LLC BEN E CUMMINGS 1821 CEDAR AVE LEWISTON ID 83501 USA		BEN CUMMINGS 1821 CEDAR AVE LEWISTON 83501			
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 MEMBER	Name BEN E CUMMINGS	Street or PO Address 1821 CEDAR AVE.		City LEWISTON	State ID	Country USA	Postal Code 83501
5. Organized Under the Laws of: ID W 87820		6. Annual Report must be signed.* Signature: ben e. cummings Name (type or print): ben e. cummings Date: 10/25/2014 Title: member					
Processed 10/25/2014 * Electronically provided signatures are accepted as original signatures.							