

No. <b>W 103929</b>		<b>Due no later than Jun 30, 2016</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>Annual Report Form</b>  <b>1. Mailing Address: Correct in this box if needed.</b>  EPIC DERMIS LLC TAURREN NAY 1105 JULIA ST MOUNTAIN HOME ID 83647		TAURREN NAY 1105 JULIA ST MOUNTAIN HOME ID 83647	
				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
MEMBER	TAURREN NAY	1105 JULIA ST	MOUNTAIN HOME	ID	USA 83647
5. Organized Under the Laws of:  <b>ID W 103929</b>		6. Annual Report must be signed.* Signature: Taurren Nay Name (type or print): Taurren Nay Date: 05/02/2016 Title: Sole Member			
Processed 05/02/2016		* Electronically provided signatures are accepted as original signatures.			