

|                                                                                                                                                        |                  |                                                                                                                                                                              |        |                                                       |         |             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------|---------|-------------|--|
| No. <b>W 96826</b>                                                                                                                                     |                  | <b>Due no later than Sep 30, 2012</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><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>NASTY SHIRTS, LLC<br>MARC TRIVELPIECE<br>411 HARVEST DR<br>MOSCOW ID 83843 |        | MARC TRIVELPIECE<br>411 HARVEST DR<br>MOSCOW ID 83843 |         |             |  |
|                                                                                                                                                        |                  |                                                                                                                                                                              |        | 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                                                                                                                                                 | MARC TRIVELPIECE | 411 HARVEST DR                                                                                                                                                               | MOSCOW | ID                                                    | USA     | 84843       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 96826</b>                                                                                           |                  | 6. Annual Report must be signed.*<br>Signature: Marc Trivelpiece<br>Name (type or print): Marc Trivelpiece<br>Date: 08/02/2012<br>Title: Member                              |        |                                                       |         |             |  |
| Processed 08/02/2012                                                                                                                                   |                  | * Electronically provided signatures are accepted as original signatures.                                                                                                    |        |                                                       |         |             |  |