

No. W 113753	Due no later than May 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed.		ANGELA FAITH FRASURE 1830 RAINIER DRIVE POCATELLO ID 83201-2255			
	GINGER LOU, L.L.C. ANGELA FAITH FRASURE 1830 RAINIER DRIVE POCATELLO ID 83201-2255		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
MANAGER	ANGELA FAITH FRASURE	1830 RAINIER DRIVE	POCATELLO	ID	USA	83201-2255
5. Organized Under the Laws of: ID W 113753		6. Annual Report must be signed.* Signature: Angela Frasure Name (type or print): Angela Frasure		Date: 05/11/2014 Title: Member		
Processed 05/11/2014		* Electronically provided signatures are accepted as original signatures.				