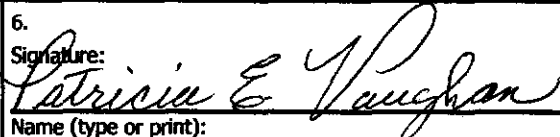
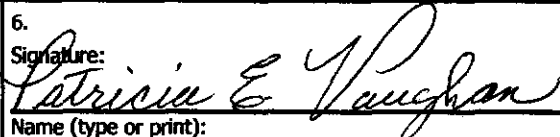
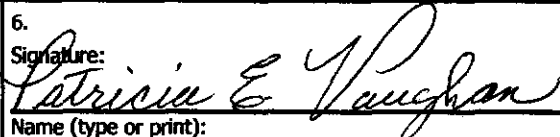


No. W 105204	Due no later than Jul 31, 2012 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) PATRICIA VAUGHAN 521 E NOBLE FIR CT NAMPA ID 83686																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. OUTERFRINGES LLC PATRICIA VAUGHAN 521 E NOBLE FIR CT NAMPA ID 83686		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 15%;">Manager or Member</th> <th style="text-align: left; width: 25%;">Name</th> <th style="text-align: left; width: 30%;">Street or PO Address</th> <th style="text-align: left; width: 10%;">City</th> <th style="text-align: left; width: 10%;">State</th> <th style="text-align: left; width: 10%;">Country</th> <th style="text-align: left; width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>PATRICIA VAUGHAN</td> <td>521 NOBLE FIR CT</td> <td>NAMPA</td> <td>ID</td> <td>USA</td> <td>83686</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>MARGY BOSTON</td> <td>191 E KENTER ST</td> <td>KUNA</td> <td>ID</td> <td>USA</td> <td>83634</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	PATRICIA VAUGHAN	521 NOBLE FIR CT	NAMPA	ID	USA	83686	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	MARGY BOSTON	191 E KENTER ST	KUNA	ID	USA	83634	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> IDAHO W 105204 </div>		6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; vertical-align: top;"> Signature:  Name (type or print): PATRICIA E. VAUGHAN </td> <td style="width: 30%; vertical-align: top;"> Date: 6-5-12 Title: MANAGER </td> </tr> </table>		Signature:  Name (type or print): PATRICIA E. VAUGHAN	Date: 6-5-12 Title: MANAGER																																	
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