

No. W 122919		Due no later than Mar 31, 2015 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. PERMANENT MAKEUP BY APPOINTMENT, LLC TRINA K IRELAND PO BOX 656 FRUITLAND ID 83619		TRINA K IRELAND 615 SW 2ND ST FRUITLAND 83619			
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 MANAGER	Name TRINA K IRELAND	Street or PO Address P.O. BOX 656		City FRUITLAND	State ID	Country USA	Postal Code 83619
5. Organized Under the Laws of: ID W 122919		6. Annual Report must be signed.* Signature: Trina K. Ireland Name (type or print): Trina K. Ireland Date: 01/16/2015 Title: Manager					
Processed 01/16/2015 * Electronically provided signatures are accepted as original signatures.							