

No. <b>W 13252</b>		<b>Due no later than Oct 31, 2014</b> <b>Annual Report Form</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>1. Mailing Address: Correct in this box if needed.</b>  ALL OCCASION FLORAL & GIFT, LLC CRAIG L GEARY 469 E CENTER SHELLEY ID 83274		CRAIG L GEARY 192 W PINE SHELLEY 83274			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	CRAIG L GEARY	469 E CENTER	SHELLEY	ID	83274		
MEMBER	LISA GEARY	469 E CENTER	SHELLEY	ID	83274		
5. Organized Under the Laws of:  <b>ID</b> <b>W 13252</b>		6. Annual Report must be signed.*  Signature: Craig L. Geary Name (type or print): Craig L. Geary					
		Date: 11/12/2014 Title: President					
Processed 11/12/2014		* Electronically provided signatures are accepted as original signatures.					