

|  |                   |  |       |   |         |                  |  |
|--|-------------------|--|-------|---|---------|------------------|--|
| No. <b>W 134079</b>  |                   | <b>Due no later than Feb 29, 2016</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>1. Mailing Address: Correct in this box if needed.</b><br><br>TOOLS FOR FABULOUS, LLC<br>ROBYN D GRIFFITHS<br>2242 E SERENE DRIVE<br>BOISE ID 83706 |       | ROBYN D GRIFFITHS<br>2242 E SERENE DRIVE<br>BOISE ID 83706-8370 |         |                  |  |
|  |                   |  |       | 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   | ROBYN D GRIFFITHS | 2242 SERENE DRIVE  | BOISE | ID  | USA     | 83706            |  |
| 5. Organized Under the Laws of:  |                   | 6. Annual Report must be signed.*  |       |   |         |                  |  |
| <b>ID<br/>W 134079</b>   |                   | Signature: Robyn D Griffiths   |       |   |         | Date: 01/03/2016 |  |
|  |                   | Name (type or print): Robyn D Griffiths  |       |   |         | Title: Member    |  |
| Processed 01/03/2016   |                   | * Electronically provided signatures are accepted as original signatures.  |       |   |         |                  |  |