

| | | | | | | | |
|--|-----------------|---|---------|--|------------------|-------------|--|
| No. W 94050 | | Due no later than Jun 30, 2012 | | 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 | | Annual Report Form | | SPENCER D RAY 110 W 1STS REXBURG ID 83440 | | | |
| | | 1. Mailing Address: Correct in this box if needed. | | 3. <u>New</u> Registered Agent Signature:* | | | |
| | | TIME 2 BEAD LLC SPENCER D RAY 110 W 1ST S REXBURG ID 83440 | | | | | |
| 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 | MICHELLE J. RAY | 110 W 1ST S | REXBURG | ID | USA | 83440-2104 | |
| MANAGER | SPENCER D. RAY | 110 WEST 1ST SOUTH | REXBURG | ID | USA | 83440-2104 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | |
| ID W 94050 | | Signature: Spencer Ray | | | Date: 06/30/2012 | | |
| | | Name (type or print): Spencer Ray | | | Title: Manager | | |
| Processed 06/30/2012 | | * Electronically provided signatures are accepted as original signatures. | | | | | |