

No. <b>W 131023</b>		<b>Due no later than Nov 30, 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>  BROOKE DAVIS AESTHETICS LLC BROOKE DAVIS 14 HUMMINGBIRD HAVEN BOISE ID 83716-3254 USA		BROOKE DAVIS 14 HUMMINGBIRD HAVEN BOISE 83716-3254			
<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	BROOKE DAVIS	14 HUMMINGBIRD HAVEN	BOISE	ID	USA	83716-3254	
5. Organized Under the Laws of:  <b>ID</b> <b>W 131023</b>		6. Annual Report must be signed.*  Signature: BROOKE DAVIS Name (type or print): BROOKE DAVIS					
		Date: 12/09/2014 Title: MEMBER					
Processed 12/09/2014      * Electronically provided signatures are accepted as original signatures.							