No. W 187658 Return to:		Due no later than Aug 31, 2018 Annual Report Form 1. Mailing Address: Correct in this box if needed. YOUR COLOR LLC SUSAN MACARTNEY 2195 N. CAMDEN DR BOISE ID 83704			2. Registered Agent and Address (NO PO BOX) SUSAN MACARTNEY 2195 N. CAMDEN DR BOISE ID 83704 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Comp	oanies: Enter Na	mes and Addresses o	f at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	BER SUSAN MACARTNEY		2195 N. CAMDEN	BOISE	ID	USA	83704	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Susar		Date: 08/14/2018				
W 187658		Name (type or pr		Title: owner				
Processed 08/14/2018 * Electronically provided signatures are accepted as original signatures.								