No. **W 1607**	**Due no later than Oct 31, 2013** **Annual Report Form**	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**	**1. Mailing Address: Correct in this box if needed.** DAISY'S OLDE TIME CONFECTIONS, LIMITED LIABILITY COMPANY MARK S HUBER 1886 ADDISON AVE E TWIN FALLS ID 83301	MARK S HUBER 1886 ADDISON AVE E TWIN FALLS ID 83301 3. New 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
MANAGER	MARK S HUBER	2058 STADIUM BLVD	TWIN FALLS	ID	USA	83301

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 1607**	Signature: Mark S. Huber	Date: 08/13/2013
	Name (type or print): Mark S. Huber	Title: Manager

Processed 08/13/2013

* Electronically provided signatures are accepted as original signatures.