No. **W 138773**	**Due no later than Jun 30, 2015** **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.** FEATHERED FLIP, LLC (THE) 200 BASELINE RD BELLEVUE ID 83313	ALI INGRAM 14 E CROY ST UNIT B HAILEY ID 83333 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	ALI E. INGRAM	14 E CROY ST. UNIT B	HAILEY	ID	USA	83333

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 138773**	Signature: Ali Ingram Name (type or print): Ali Ingram	Date: 07/14/2015 Title: Owner/Manager

Processed 07/14/2015

* Electronically provided signatures are accepted as original signatures.