

No. W 172726		Due no later than Oct 31, 2017 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		1. Mailing Address: Correct in this box if needed. WHAT WOMEN WANT LLC AMIE SUMSION 29030 PARMA RD PARMA ID 83660		AMIE SUMSION 29030 PARMA RD PARMA ID 83660			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name AMIE SUMSION	Street or PO Address 29030 PARMA RD.		City PARMA	State ID	Country USA	Postal Code 83660
5. Organized Under the Laws of: ID W 172726		6. Annual Report must be signed.* Signature: Amie Sumsion Name (type or print): Amie Sumsion Date: 08/20/2017 Title: Owner					
Processed 08/20/2017 * Electronically provided signatures are accepted as original signatures.							