

No. W 67873	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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. PERKS OF LIFE LLC (THE) HEATHERLYN ANDRADE 1540 E IRON EAGLE DR STE 130 EAGLE ID 83616		ANDREA VLAANDEREN 6505 W SOUTH SLOPE ROAD EMMETT ID 83617			
			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	ANDREA VLAANDEREN	6505 W SOUTH SLOPE ROAD	EMMETT	ID		83617
MEMBER	HEATHERLYN ANDRADE	211 SAINT CHARLES COURT	MIDDLETON	ID		83644
5. Organized Under the Laws of: ID W 67873	6. Annual Report must be signed.* Signature: Heatherlyn Andrade Name (type or print): Heatherlyn Andrade		Date: 11/21/2017 Title: Member			
Processed 11/21/2017		* Electronically provided signatures are accepted as original signatures.				