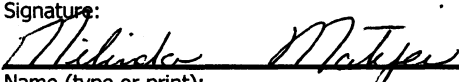
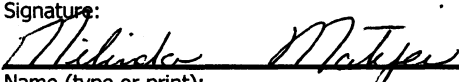
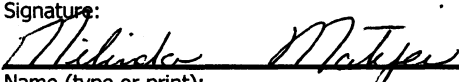


No. W 83303	Due no later than Apr 30, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ALL DAY \$49 IDAHO REGISTERED A 1900 NORTHWEST BLVD STE 106A COEUR D ALENE ID 83814 USA
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. FAMILY CABIN CUTS LLC MILINDA M MATEJA 2315 S MONTANA AVE CALDWELL ID 83605		3. <u>New</u> Registered Agent Signature.

4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.

Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	Milinda Mateja	2315 S. Montana	Caldwell	ID.	Canyon	83605
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager <input type="checkbox"/> Member <input type="checkbox"/>						

5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 83303 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: <u>3-14-14</u> </td> </tr> <tr> <td> Name (type or print): <u>Milinda Mateja</u> </td> <td> Title: <u>owner</u> </td> </tr> </table>	Signature: 	Date: <u>3-14-14</u>	Name (type or print): <u>Milinda Mateja</u>	Title: <u>owner</u>
Signature: 	Date: <u>3-14-14</u>				
Name (type or print): <u>Milinda Mateja</u>	Title: <u>owner</u>				