

No. W 77321	Due no later than Sep 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.		CHRISTA HANNOLD 202 SHOSHONE ST E TWIN FALLS ID 83301			
	CHRISTA'S DRESS SHOPPE L.L.C. CHRISTA L HANNOLD 202 SHOSHONE ST E TWIN FALLS ID 83301 USA		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
MANAGER	JAY W HANNOLD	809 EASTRIDGE DR	KIMBERLY	ID	USA	83341
MANAGER	CHRISTA L HANNOLD	809 EASTRIDGE DR	KIMBERLY	ID	USA	83341
5. Organized Under the Laws of: ID W 77321		6. Annual Report must be signed.* Signature: Christa L. Hannold Name (type or print): Christa L. Hannold Date: 10/10/2015 Title: Owner				
Processed 10/10/2015		* Electronically provided signatures are accepted as original signatures.				