| No. <b>W 8521</b>  |            | Due no later than Apr 30, 2015   | 2. Registered Age                                  | 2. Registered Agent and Address (NO PO BOX) |            |             |  |
|--|------------|--|--|---|------------|-------------|--|
| Return to:   |            | Annual Report Form   | HEIDI G ACUFF 112 HAZELWOOD DR COEUR D'ALENE 83814 |   |            |             |  |
| SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080               |            | 1. Mailing Address: Correct in this box if needed. HEIDI'S COTTAGE CLASSICS, L.L.C. HEIDI G ACUFF 112 HAZELWOOD DR |  |   |            |             |  |
| NO FILING FEE IF<br>RECEIVED BY DUE DATE   |            | COEUR D'ALENE ID 83814<br>USA  | 3. <u>New</u> Registered                           | Agent S                                     | ignature:* |             |  |
| 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   | HEIDI G AC | UFF 112 HAZELWOOD DR   | COEUR D'ALENE                                      | ID  |            | 83814       |  |
| 5. Organized Under the Laws of:  |            | 6. Annual Report must be signed.*  |  |   |            |             |  |
| ID   |            | Signature: Heidi G. Acuff  | Date: 04/15/2015                                   |   |            |             |  |
| W 8521   |            | Name (type or print): Heidi G. Acuff   | Title: Manager                                     |   |            |             |  |
| Processed 04/15/2015 * Electronically provided signatures are accepted as original signatures. |            |  |  |   |            |             |  |