

|  |   |  |   |                                      |         |             |
|--|---|--|---|--------------------------------------|---------|-------------|
| No. <b>W 152906</b>  | <b>Due no later than Jun 30, 2016</b><br><b>Annual Report Form</b>  |  | 2. Registered Agent and Address <b>(NO PO BOX)</b>      |                                      |         |             |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> | <b>1. Mailing Address: Correct in this box if needed.</b><br>CELL FUNCTION, LLC<br>INNA BIBIKOV<br>2421 N SEQUOIA AVE<br>MERIDIAN ID 83646<br>USA |  | INNA BIBIKOV<br>2421 N SEQUOIA AVE<br>MERIDIAN ID 83646 |                                      |         |             |
|  |   |  | 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   | INNA BIBIKOV  | 2421 N SEQUOIA AVE   | MERIDIAN  | ID                                   | USA     | 83646       |
| 5. Organized Under the Laws of:<br><br><b>ID</b><br><b>W 152906</b>  |   | 6. Annual Report must be signed.*<br>Signature: INNA BIBIKOV<br>Name (type or print): INNA BIBIKOV |   | Date: 05/16/2016<br>Title: PRESIDENT |         |             |
| Processed 05/16/2016   |   | * Electronically provided signatures are accepted as original signatures.                          |   |                                      |         |             |