




No. W 59713	Due no later than Feb 29, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) LORI SKINNER 1681 RUBY CREEK RD NAPLES ID 83847
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. CHARNIN'S ROSE, LLC LORI SKINNER 1681 RUBY CREEK RD NAPLES ID 83847		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"/>	Lori Skinner	P.O. Box 143	Naples	ID	Boundary	83847
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	Bret Skinner	P.O. Box 143	Naples	ID	Boundary	83847
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; font-weight: bold;"> IDAHO W 59713 </div>	6. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;"> Signature: <u></u> </td> <td style="width: 40%; padding: 5px;"> Date: <u>1-3-2016</u> </td> </tr> <tr> <td style="padding: 5px;"> Name (type or print): <u>Lori Skinner</u> </td> <td style="padding: 5px;"> Title: <u>manager</u> </td> </tr> </table>	Signature: <u></u>	Date: <u>1-3-2016</u>	Name (type or print): <u>Lori Skinner</u>	Title: <u>manager</u>
Signature: <u></u>	Date: <u>1-3-2016</u>				
Name (type or print): <u>Lori Skinner</u>	Title: <u>manager</u>				