

No. <b>W 49614</b>		<b>Due no later than Apr 30, 2015</b>		<b>Annual Report Form</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b> CJL ACCOUNTING SERVICES LLC CATHERINE LEAVITT 943 W. OAKHAMPTON DR. EAGLE ID 83616-6744 USA		CATHERINE LEAVITT 943 W. OAKHAMPTON DR. EAGLE 83616-6744		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	CATHERINE LEAVITT	943 W. OAKHAMPTON DR.	EAGLE	ID		83616-6744	
5. Organized Under the Laws of:  <b>ID W 49614</b>		6. Annual Report must be signed.* Signature: CATHERINE LEAVITT Name (type or print): CATHERINE LEAVITT		Date: 02/15/2015 Title: MANAGER			
Processed 02/15/2015		* Electronically provided signatures are accepted as original signatures.					