No. <b>W 117534</b>	Due no later than Sep 30, 2013	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form	DENICE LAMONT			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.	1950 SUNFLOWER CIR AMMON ID 83406			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LAMONT ENTERPRISES, LLC DENICE LAMONT 1950 SUNFLOWER CIR	Arimole 1D 03-100			
	AMMON ID 83406	3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE	USA				
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 MATT STEE	ILE 160 MONTE VISTA AVE.	IDAHO FALLS	ID	USA	83401-3641
5. Organized Under the Laws of:	6. Annual Report must be signed.*				
ID	Signature: D.Lamont Date: 09/27/2013				
W 117534	Name (type or print): D.Lamont	Title: Owner Ceo			
Processed 09/27/2013	* Electronically provided signatures are accepted as original signatures.				