No. <b>W 55926</b>		Due no later than Nov 30, 2014		2	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed.  ROCKY POINT KENNELS, LLC 7916 E HOMESTEAD CT  NAMPA ID 83687			KEVIN MARSHALL 7916 E HOMESTEAD CT NAMPA 83687  3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Nai	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	KEVIN R MA	ARSHALL	8057 E COLTER BAY DR		NAMPA	ID		83687
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Kevin Marshall			Date: 10/21/2014			
W 55926		Name (type or print): Kevin Marshall			Title: Manager			
Processed 10/21/2014 * Electronically provided signatures are accepted as original signatures.								