| No. W 10931 | | Due no later than Jan 31, 2015 | | 2. Registere | 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. KILLPACK RENTAL, LLC GARRY KILLPACK 1140 N 1290 E SHELLEY ID 83274 USA | | 1110 N 1 | GARRY KILLPACK 1140 N 1290 E | | | |
| | | | | SHELLEY | SHELLEY 83274 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Comp | anies: Enter N | ames and Addresse | s of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | GARRY KILLPACK | | 1140 N 1290 E | SHELLEY | ID | | 83274 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 10931 | | Signature: GA | | Date: 12/12/2014 | | | | |
| | | Name (type o | | Title: MANAGER | | | | |
| Processed 12/12/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |