No. W 63739		Due no later than Jun 30, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. TOUCAN TILE LLC CRAIG R SHEPHERD 3686 N 2710 E TWIN FALLS ID 83301		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:				0.0000000000000000000000000000000000000	CRAIG SHEPHERD			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080				TWIN FALLS	3686 N 2710 E TWIN FALLS ID 83301 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Nar	nes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER MEMBER MEMBER	BER PAUL SHEPHERD		3686 N 2710 E 1217 BLUE LAKES CIRCLE 440 4TH AVE N	TWIN FALLS TWIN FALLS TWIN FALLS	ID ID ID	USA USA USA	83301 83301 83301	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Craig F		Date: 04/16/2014				
W 63739		Name (type or pri		Title: Owner				
Processed 04/16/2014 * Electronically provided signatures are accepted as original signatures.								