

No. W 58790	Due no later than Feb 28, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. MACKERT, LLC HALI MACKERT 702 NORTH 2300 EAST ST ANTHONY ID 83445 USA		CHAD MACKERT 702 NORTH 2300 EAST ST ANTHONY 83445			
			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
MEMBER	CHAD MACKERT	702 NORTH 2300 EAST	ST ANTHONY	ID		83445
MEMBER	HALI MACKERT	702 NORTH 2300 EAST	ST ANTHONY	ID		83445
5. Organized Under the Laws of: ID W 58790	6. Annual Report must be signed.* Signature: Hali Mackert Name (type or print): Hali Mackert		Date: 01/07/2015 Title: Member			
Processed 01/07/2015		* Electronically provided signatures are accepted as original signatures.				