No. <b>W 95966</b>		Due no later than Aug 31, 2014 Annual Report Form  1. Mailing Address: Correct in this box if needed.  3 J'S COFFEE SHOP, LLC EVERETTE JONES PO BOX 1574 SALMON ID 83467		2. Registered Agent and Address (NO PO BOX)  PAUL WITHERS  1301 MAIN ST  SALMON ID 83467  3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing A 3 J'S COFFEE S EVERETTE JO PO BOX 1574						
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Enter	Names and Addresse	s of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER MICHAEL MANAGER EVERETTI	R JOHNSTON JONES	PO BOX 38 PO BOX 1574	CARMEN SALMON	ID ID	USA USA	83462 83467	
5. Organized Under the Laws of: 6. Annual Re		must be signed.*					
ID	Signature: EV	Signature: EVERETTE JONES			Date: 09/29/2014		
W 95966	Name (type or	Name (type or print): EVERETTE JONES		Title: MANAGER			
Processed 09/29/2014	* Electronically pr	* Electronically provided signatures are accepted as original signatures.					