No. W 70929		Due no later than Jan 31, 2013	2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form	JOHN OMAN 11448 CONCORD RIVER WAY NAMPA ID 83686				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SIGNATURE LAWN CARE LLC JOHN OMAN 11448 CONCORD RIVER WAY					
		NAMPA ID 83686	3. <u>New</u> Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Co	ompanies: Enter Nai	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER JOHN OMAN		2320 SUNNYBROOK DR #203	NAMPA	ID	USA	83686	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
ID		Signature: JT Oman	Date: 01/29/2013				
W 70929		Name (type or print): JT Oman	Title: Owner				
Processed 01/29/2013 * Electronically provided signatures are accepted as original signatures.							