

No. <b>W 109271</b>		<b>Due no later than Dec 31, 2013</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  HRUZA INSURANCE AGENCY, LLC MARLISA HRUZA PO BOX 457 RUPERT ID 83350		JOSEPH L MORTON III 132 SW 5TH AVE STE 150 MERIDIAN ID 83642			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name DAVID HRUZA	Street or PO Address 723 S 3RD ST		City RUPERT	State ID	Country USA	Postal Code 83350
5. Organized Under the Laws of:  <b>NV</b> <b>W 109271</b>		6. Annual Report must be signed.*  Signature: Marlisa Name (type or print): Marlisa  Date: 01/16/2014 Title: Office Manager					
Processed 01/16/2014 * Electronically provided signatures are accepted as original signatures.							