

|                                                                                                                                                        |                |                                                                                                                                                                                         |          |                                                                            |                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------------------------------------------------------------------------|---------------------|
| No. <b>W 24949</b>                                                                                                                                     |                | <b>Due no later than Jul 31, 2015</b>                                                                                                                                                   |          | 2. Registered Agent and Address <b>(NO PO BOX)</b>                         |                     |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>LJR ENTERPRISES, LLC<br>LADON J REAMES<br>1223 NORTH GALLERIA DRIVE<br>NAMPA ID 83687 |          | NATIONAL REGISTERED AGENTS INC<br>921 S ORCHARD ST STE G<br>BOISE ID 83705 |                     |
|                                                                                                                                                        |                |                                                                                                                                                                                         |          | 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                                                                                                                                                 | LADON J REAMES | 25574 FAIRWAY DR                                                                                                                                                                        | CALDWELL | ID                                                                         | 83607               |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 24949</b>                                                                                           |                | 6. Annual Report must be signed.*<br>Signature: Angela J Hawkins<br>Name (type or print): Angela J Hawkins<br>Date: 05/21/2015<br>Title: Manager                                        |          |                                                                            |                     |
| Processed 05/21/2015                                                                                                                                   |                | * Electronically provided signatures are accepted as original signatures.                                                                                                               |          |                                                                            |                     |