| No. W 29029 | | Due no later than Mar 31, 2014 | | 2. Registered Age | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|------|---|------------------------|--|---|---------|-------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. LEWIS VENTURES II LLC LAURA LEWIS PO BOX 3626 IDAHO FALLS ID 83401 | | 3006 E GOLDS | PACIFIC REGISTERED AGENTS INC 3006 E GOLDSTONE DR STE 211 MERIDIAN ID 83642 | | | |
| | | | | USA 3. New Registered Agent Signature:* | | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | IDANO FALLS ID 63401 | | 5. INCOVE REGISTER CA 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 | |
| MANAGER LAURA S LEWI | | WIS | 5628 CANYONWOOD CIRCLE | IDAHO FALLS | ID | USA | 83406 | |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID W 29029 | | Signature: Laura Lewis | | Date: 04/29/2014 | | | | |
| | | Name (type or print): Laura Lewis | | Title: President | | | | |
| Processed 04/29/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |