

No. <b>W 48243</b>	<b>Due no later than Mar 31, 2015</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>NO FILING FEE IF          RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b>		MANDY HAZEN 811 7TH ST S NAMPA 83651			
			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	ROBERT LAIRD	PO BOX 4116	BELLFLOWER	CA		90707
MEMBER	MICHAEL LAIRD	PO BOX 4116	BELLFLOWER	CA		90707
5. Organized Under the Laws of:  <b>ID W 48243</b>	6. Annual Report must be signed.* Signature: robert laird Name (type or print): robert laird		Date: 03/23/2015 Title: owner			
Processed 03/23/2015		* Electronically provided signatures are accepted as original signatures.				