

No. W 128883	Due no later than Sep 30, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. WILKINS INSURANCE, LLC ERIC WILKINS 818 W DALLAN WOODS WAY NAMPA ID 83686 USA		ERIC WILKINS 818 W DALLAN WOODS WAY NAMPA ID 83686			
			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
MANAGER	ERIC WILKINS	818 W DALLAN WOODS WAY	NAMPA	ID	USA	83686
5. Organized Under the Laws of: ID W 128883	6. Annual Report must be signed.* Signature: Eric Wilkins Name (type or print): Eric Wilkins		Date: 09/15/2014 Title: Manager			
Processed 09/15/2014		* Electronically provided signatures are accepted as original signatures.				