No. C 198458		Due no later than May 31, 2014		2. Registered Agent and Address (NO PO BOX)			
l <u> </u>			988 W KIND KUNA ID 8	JOHN MCNICHOLL 988 W KIND RD KUNA ID 83634 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Corporations: Enter Names and E	usiness Addresses of Pre	sident, Secretary, and Directors. Treas	surer (optional).				
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR LEAH M	RECTOR LEAH MCNICHOLL		KUNA	ID	USA	83634	
DIRECTOR JOHN M	CTOR JOHN MCNICHOLL		KUNA	ID	USA	83634	
SECRETARY LEAH M	CNICHOLL	988 W KING RD	KUNA	ID	USA	83634	
PRESIDENT JOHN M	CNICHOLL	988 W KING RD	KUNA	ID	USA	83634	
5. Organized Under the Laws of: 6. Annual Report		ust be signed.*					
ID Signature: Chr		ristina Hite Date: 03/26/2014					
C 198458 Name (type or		int): Christina Hite	Title: Finance Manager				
Processed 03/26/2014	* Electronically provided signatures are accepted as original signatures.						