No. <b>W 118480</b>		Due no later than Oct 31, 2014		2. F	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			KRISTINE MARXER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  LEMHI VALLEY VACATIONS, LLC  KRISTINE MARXER  4696 LEMHI RD  LEADORE ID 83464		ı	4696 LEMHI RD LEADORE 83464  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.								
Office Held	Name		Street or PO Address	Ci	ty	State	Country	Postal Code
MEMBER KRISTINE MARXER		ARXER	4696 LEMHI RD	LE	ADORE	ID	USA	83464
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: KRISTINE MARXER			Date: 11/24/2014			
W 118480		Name (type or print): KRISTINE MARXER			Title: MEMBER			
Processed 11/24/2014 * Electronically provided signatures are accepted as original signatures.								