

No. W 107374		Due no later than Oct 31, 2015		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. OUT ON A LIMB TREE SERVICE LLC SAM RAGAN PO BOX 610 PLUMMER ID 83851		CHARYL A STORNETTA 1042 BOSWELL RD PLUMMER ID 83851			
				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	CHARYL RAGAN	PO BOX 610	PLUMMER	ID	USA	83851	
MANAGER	SAM RAGAN	PO BOX 610	PLUMMER	ID	USA	8351	
5. Organized Under the Laws of: ID W 107374		6. Annual Report must be signed.* Signature: Charyl Ragan Name (type or print): Charyl Ragan					
Date: 09/05/2015 Title: Member							
Processed 09/05/2015		* Electronically provided signatures are accepted as original signatures.					