No. <b>W 112719</b>		Due no later than Apr 30, 2016	2. Registered Agent and Address (NO PO BOX)  STEVE SMITH 1297 ROBINS AVE IDAHO FALLS ID 83401  3. New Registered Agent Signature:*			
Return to:		Annual Report Form				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  SMITH & SONS LAWN CARE, LLC STEVE SMITH 1297 ROBINS AVE IDAHO FALLS ID 83401				
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	City	State	Country	Postal Code
MANAGER STEVE SMIT		TH 1297 ROBINS AVE	IDAHO FALLS	ID	USA	83401
5. Organized Under the Laws of:		6. Annual Report must be signed.*				
ID		Signature: Steve Smith	Date: 03/15/2016			
W 112719		Name (type or print): Steve Smith	Title: Manager			
Processed 03/15/2016 * Electronically provided signatures are accepted as original signatures.						