

No. W 24648		Due no later than Jun 30, 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		Annual Report Form 1. Mailing Address: Correct in this box if needed. GRAVITY RECOVERY, LLC LARRY F MASHBURN 516 NE BEAMAN ST MOUNTAIN HOME ID 83647		LARRY F MASHBURN 516 NE BEAMAN ST. MOUNTAIN HOME ID 83647	
				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	LARRY F MASHBURN	516 NE BEAMAN ST	MOUNTAIN HOME	ID	83647
5. Organized Under the Laws of: ID W 24648		6. Annual Report must be signed.* Signature: LARRY F. MASHBURN Name (type or print): LARRY F. MASHBURN Date: 05/01/2015 Title: MANAGER			
Processed 05/01/2015		* Electronically provided signatures are accepted as original signatures.			