




No. W 87642	Due no later than Oct 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) W ROY BROWN 631 MEADOW BROOK CT NAMPA ID 83686																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. B & B AUTO FINANCING L.L.C. PO BOX 464 NAMPA ID 83653		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 20%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 10%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>W. Roy BROWN</td> <td>P.O. Box 464 Nampa</td> <td>Id</td> <td>Canyon</td> <td></td> <td>83653</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/></td> <td>DAVID BROWN</td> <td>P.O. Box 464 Nampa, Id</td> <td></td> <td></td> <td></td> <td>83653</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	W. Roy BROWN	P.O. Box 464 Nampa	Id	Canyon		83653	Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DAVID BROWN	P.O. Box 464 Nampa, Id				83653	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code																																
Manager <input checked="" type="checkbox"/> Member <input checked="" type="checkbox"/>	W. Roy BROWN	P.O. Box 464 Nampa	Id	Canyon		83653																																
Manager <input type="checkbox"/> Member <input checked="" type="checkbox"/>	DAVID BROWN	P.O. Box 464 Nampa, Id				83653																																
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
Manager <input type="checkbox"/> Member <input type="checkbox"/>																																						
5. Organized Under the Laws of: <div style="text-align: center;"> IDAHO W 87642 </div>		6. <table style="width: 100%;"> <tr> <td style="width: 60%;"> Signature:  </td> <td style="width: 40%;"> Date: MANAGER </td> </tr> <tr> <td> Name (type or print): W. Roy BROWN </td> <td> Title: 9/4/2014 </td> </tr> </table>		Signature: 	Date: MANAGER	Name (type or print): W. Roy BROWN	Title: 9/4/2014																															
Signature: 	Date: MANAGER																																					
Name (type or print): W. Roy BROWN	Title: 9/4/2014																																					

Issued 09/02/2014 by JLI

101048

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM