No. W 75198 Return to:		Due no later than Jun 30, 2013 Annual Report Form		2	2. Registered Agent and Address (NO PO BOX) JAMES E WATERS			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JIM WATERS INSURANCE LLC JAMES E WATERS 1713 12TH AVE RD NAMPA ID 83686		_	1713 12TH AVE RD NAMPA ID 83686 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses of a	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	JAMES E WATERS		1713 12TH AVE RD		Nampa	ID	USA	83686
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 75198		Signature: Jim Waters			Date: 04/24/2013			
		Name (type or print): Jim Waters			Title: Owner			
Processed 04/24/2013 * Electronically provided signatures are accepted as original signatures.								