

No. W 110940	Due no later than Feb 28, 2014 Annual Report Form		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.		TAMI SHAWVER 2355 E 4100 N FILER ID 83328			
	6-S LLC TAMI SHAWVER 2355 E 4100 N FILER ID 83328		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	TAMI J SHAWVER	2355 E 4100 N	FILER	ID	USA	83328
5. Organized Under the Laws of: ID W 110940		6. Annual Report must be signed.* Signature: Tami Shawver Name (type or print): Tami Shawver		Date: 02/15/2014 Title: Manager		
Processed 02/15/2014		* Electronically provided signatures are accepted as original signatures.				