No. W 66920	)	Due no later than Sep 30, 2010				2. Registered Agent and Office (NOT A P.O. BOX) BRET NIELSEN 616 N BOYER AVENUE SANDPOINT ID 83864  3. New Registered Agent Signature.			
Return to:		Annual Report Form							
SECRETARY OF STA	TE 1. M	1. Mailing Address: Correct in this box if needed. SIXTH STREET PLUMBING, LLC BRET NIELSEN 616 N BOYER AVENUE SANDPOINT ID 83864							
450 N 4th STREET									
PO BOX 83720	BRE								
BOISE, ID 83720-00	180								
NO FILING FEE II RECEIVED BY DU	F	DIOINI ID	,5001						· .
DATE	·								
4. Limited Liability Con	npanies: Ent	er Names and Add	resses of Manage	ers OR Membe	ers.				
Office Held	Name	***************************************	Street or PO A	Address		City	State	Country	Postal Code
Member Bret Ni		lie <i>ls</i> en	Lelle N	Boyer A	ve	Sandpoi	uf, ID	USA	83864
Member	Tracy	lie <i>ls</i> en Nielsen	le16 N	Boyer,	Ave	Sandpo	int, 1p	usa .	8396H
5. Organized Under the	e Laws of:			. 0					1.1
TDAHO		Signature: Preshielse						Date: •	7/30/10
IDAHO						<u>,                                    </u>			<del>-//</del>
W 6692	0	Name (type or print): Bret Nielsen						Title:	Nember
Issued 07/13/2010 by JL1									106686

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

**Block 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. **Note:** To ensure future mailings, the corrected address **must** be inside Block 1.

**Block 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. **Note:** The office of the registered agent must be at a street address in Idaho; **not a Post Office Box or Personal Mail Box.** 

Block 3: Only a <u>new</u> registered agent must sign in Block 3.