| No. W 9025 | | 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 | MIDDLETO LORRAINE 1423 ROCH | Annual Report Form 1. Mailing Address: Correct in this box if needed. MIDDLETON BUS, L.L.C. LORRAINE A VIS 1423 ROCHESTER CALDWELL ID 83605 USA | | LEONARD A VIS 1423 ROCHESTER CALDWELL ID 83605 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| 4. Limited Liability Companies: En | ter Names and Addre | esses of at least one Member or Manager. | | | | | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| | ARD A VIS NINE A VIS | 1423 ROCHESTER 1423 ROCHESTER | CALDWELL CALDWELL | ID ID | USA USA | 83605 83605 | |
| 5. Organized Under the Laws of: | 6. Annual Re | 6. Annual Report must be signed.* | | | | | |
| ID Signatu | | : Debra L Vis Date: 04/27/2015 | | | | | |
| W 9025 | Name (typ | Name (type or print): Debra L Vis Title: CPA | | | | | |
| Processed 04/27/2015 | * Electronical | * Electronically provided signatures are accepted as original signatures. | | | | | |