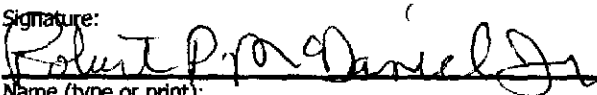


No. W 126447	Due no later than Jun 30, 2016 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT PATRICK MCDANIEL JR 232 ELM STREET TWIN FALLS ID 83301
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. JANITORIAL PLUS, LLC LISA LEE MCDANIEL PO BOX 5233 TWIN FALLS ID 83303-5233 232 Elm St Twin Falls Id 83301		3. <u>New</u> Registered Agent Signature.
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.			
Manager or Member Name Street or PO Address City State Country Postal Code			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> Robert P. McDaniel 232 Elm St Twin Falls Id 83301			
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/> LISA LEE MCDANIEL 232 elm St Twin Falls Id			
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; font-weight: bold; font-size: large;"> IDAHO W 126447 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> Signature:  Name (type or print): Robert P. McDaniel Jr. </div> <div style="width: 35%;"> Date: 05/21/2016 Title: General mgr. </div> </div>	
Issued 05/23/2016 by online		131391	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM