

No. W 126447	Due no later than Jun 30, 2016 Annual Report Form		2. Registered Agent and Office <b>(NOT A P.O. BOX)</b> 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	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. New Registered Agent Signature.	
NO FILING FEE IF RECEIVED BY DUE DATE				
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.				
Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	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:		6.		
IDAHO W 126447		Signature: <u>Robert P. McDaniel Jr.</u> Name (type or print): <u>Robert P. McDaniel Jr.</u>		
		Date: <u>05/21/2016</u> Title: <u>General mg.</u>		
Issued 05/23/2016 by online				

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

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