| No. W 27424 | | Due no later than Dec 31, 2014 | | 2. Registered Agent and Address (NO PO BOX) | | | | |
|--|------|--|----------------------|--|-------------------------------------|-------------|-----------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. AFTERHAUL, LLC JONATHAN PLUMMER PO BOX 443 MEDITIONAL ID 93690 | | JONATHAN PLUMMER 8145 E. SUN RIVER ST. NAMPA 83687 | | | | |
| | | | | | 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | MERIDIAN ID 83680 | | | 3. <u>New</u> Register | eu Agent Si | griature. | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | | |
| Office Held N | Name | | Street or PO Address | | City | State | Country | Postal Code |
| MEMBER JONATHAN F | | PLUMMER | 2250 N MERIDIAN RD | | MERIDIAN | ID | | 83642 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: Jonathan Plummer | | Date: 11/02/2014 | | | | |
| W 27424 | | Name (type or print): Jonathan Plummer | | | Title: Owner/operator | | | |
| Processed 11/02/2014 * Electronically provided signatures are accepted as original signatures. | | | | | | | | |