No. C 140711	Du	2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		MACKES CREEK DR	3605 SPRING IDAHO FALLS	SHURLDIN MACKES 3605 SPRING CREEK DR IDAHO FALLS ID 83404 3. New Registered Agent Signature:*		
4. Corporations: Enter Names and Bus	iness Addresses of	President, Secretary, and Directors. Treasu	ırer (optional).			
Office Held Name		Street or PO Address	City	State	Country	Postal Code
			IDAHO FALLS IDAHO FALLS	ID ID	USA USA	83404 83404
5. Organized Under the Laws of: 6. Annual Repo		must be signed.*				
ID Signature: L		s Mackes	Date: 07/17/2013			
C 140711 Name		(type or print): Lois Mackes Tit		Title: Director		
Processed 07/17/2013	* Electronically provided signatures are accepted as original signatures.					