

No. W 33726	Due no later than Oct 31, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ROBERT H MCELFRESH 26656 BELLA VISTA DR WILDER ID 83676- 2178 S Blackspur Way Meridian Id 83642
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. A S I M H LLC ROBERT H MCELFRESH PO BOX 247 2178 S. Blackspur Way HOMEDALE ID 83628 USA Meridian Id 83642 USA		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 H McElfresh	2178 S. Blackspur Way	Meridian Id 83642
Manager <input type="checkbox"/> Member <input type="checkbox"/>			
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-size: 1.2em;"> IDAHO W 33726 </div>		6. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> Signature: Name (type or print): Robert H McElfresh </div> <div> Date: 20 Oct 2014 Title: Owner/Manager </div> </div>	
Issued 10/16/2014 by JL1		120365	

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM