

No. W 112470	Due no later than Mar 31, 2015 Annual Report Form		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	1. Mailing Address: Correct in this box if needed. BROOKSHIER L&L RESTAURANT LLC MATTHEW K BROOKSHIER 1639 S RIVER GROVE WY EAGLE ID 83616 USA		MATTHEW K BROOKSHIER 1639 S RIVER GROVE WY EAGLE 83616			
			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	MATTHEW K BROOKSHIER	1639 S RIVER GROVE WAY	EAGLE	ID	USA	83616
5. Organized Under the Laws of: ID W 112470	6. Annual Report must be signed.* Signature: Matthew K. Brookshier Name (type or print): Matthew K. Brookshier		Date: 02/23/2015 Title: Member			
Processed 02/23/2015		* Electronically provided signatures are accepted as original signatures.				