

No. <b>W 62885</b>		<b>Due no later than May 31, 2012</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  BOB'S BIKE SHOP, LLC 1420 WATERFALL CT TWIN FALLS ID 83301		BOB CHARLTON 1420 WATERFALL CT TWIN FALLS ID 83301			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MEMBER	Name BOB CHARLTON	Street or PO Address 1420 WATERFALL CT		City TWIN FALLS	State ID	Country USA	Postal Code 83301
5. Organized Under the Laws of:  <b>ID</b> <b>W 62885</b>		6. Annual Report must be signed.*  Signature: Tami Charlton Name (type or print): Tami Charlton  Date: 03/13/2012 Title: Owner					
Processed 03/13/2012      * Electronically provided signatures are accepted as original signatures.							