No. W 73419		Due no later than Apr 30, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. GO-N-MOW LAWNCARE LLC MARTY D. JACOBS 968 LINCOLN TWIN FALLS ID 83301		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	GO-N-MOW MARTY D. 968 LINCOLI			MARTY JACOBS 3407 N A 3300 E KIMBERLY 83341 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
200 82 8	er Names and Addres	ses of at least one Member or Manager.			_		
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	/ D. JACOBS IE L. JACOBS	3407 N A 3300 E 3407N 3300E	KIMBERLY KIMBERLY	ID ID	USA	83341 83341	
5. Organized Under the Laws of:	6. Annual Repo	6. Annual Report must be signed.*					
l ID	Signature: N	Signature: Marty D. Jacobs Date: 03/06/2015					
W 73419	Name (type	Name (type or print): Marty D. Jacobs		Title: member-agent			
Processed 03/06/2015	* Electronically	* Electronically provided signatures are accepted as original signatures.					