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| No. W 58419 | Due no later than Jan 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. JT O'KEEFFE ENTERPRISES, LLC JOHN O'KEEFFE 2417 N COLE RD BOISE ID 83704 USA | | JOHN O'KEEFFE 6085 ASPEN GLEN WAY BOISE ID 83714 | | | |
| | | | 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 | JOHN O'KEEFFE | 6085 N ASPEN GLEN WAY | BOISE | ID | | 83714 |
| MEMBER | THERESA O'KEEFFE | 6085 N ASPEN GLEN WAY | BOISE | ID | | 83714 |
| 5. Organized Under the Laws of: ID W 58419 | 6. Annual Report must be signed.* Signature: Terri O'Keeffe Name (type or print): Terri O'Keeffe | | Date: 11/14/2014 Title: Memeber | | | |
| Processed 11/14/2014 | | * Electronically provided signatures are accepted as original signatures. | | | | |