

No. W 67138	Due no later than Sep 30, 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. MAGIC VALLEY CAB AND COURIER L.L.C. WILLIAM A PETERS 3246 N 2700 E TWIN FALLS ID 83301 USA		WILLIAM A PETERS 3246 N 2700 E TWIN FALLS ID 83301			
			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
MANAGER	WILLIAM A PETERS	3246 N 2700 E	TWIN FALLS	ID		83301
MANAGER	JANICE A PETERS	3246 N 2700 E	TWIN FALLS	ID		83301
5. Organized Under the Laws of: ID W 67138	6. Annual Report must be signed.* Signature: Janice A Peters Name (type or print): Janice A Peters		Date: 09/23/2015 Title: Manager			
Processed 09/23/2015		* Electronically provided signatures are accepted as original signatures.				