

|  |                 |  |      |  |         |             |  |
|--|-----------------|--|------|--|---------|-------------|--|
| No. <b>W 87982</b>   |                 | <b>Due no later than Oct 31, 2013</b>  |      | 2. Registered Agent and Address <b>(NO PO BOX)</b>                 |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                 | <b>1. Mailing Address: Correct in this box if needed.</b><br>COLLINS & ASSOCIATES L.L.C.<br>JAMIE L ANDERSON-COLLINS<br>PO BOX 552<br>STAR ID 83669              |      | JAMIE ANDERSON-COLLINS<br>120 EAST ROOSEVELT AVE<br>NAMPA ID 83686 |         |             |  |
|  |                 |  |      | 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  | SHAWN D COLLINS | PO BOX 552   | STAR | ID   | USA     | 83669       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 87982</b>   |                 | 6. Annual Report must be signed.*<br>Signature: Jamie L. Anderson-Collins<br>Name (type or print): Jamie L. Anderson-Collins<br>Date: 08/17/2013<br>Title: Owner |      |  |         |             |  |
| Processed 08/17/2013   |                 | * Electronically provided signatures are accepted as original signatures.  |      |  |         |             |  |