

No. W 3283	Due no later than Dec 31, 2014 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.		CHRISTOPHER J MOORE 1219 IDAHO ST LEWISTON 83501			
	LEWISTON PROFESSIONAL BUILDING, LLC CHRISTOPHER J MOORE PO DRAWER 835 LEWISTON ID 83501 USA		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	THEODORE O CREASON	PO DRAWER 835	LEWISTON	ID	USA	83501-0835
MEMBER	CHRISTOPHER J MOORE	PO DRAWER 835	LEWISTON	ID		83501-0835
5. Organized Under the Laws of: ID W 3283	6. Annual Report must be signed.*					
Signature: CHRISTOPHER J MOORE			Date: 10/15/2014			
Name (type or print): CHRISTOPHER J MOORE			Title: MEMBER			
Processed 10/15/2014		* Electronically provided signatures are accepted as original signatures.				