

No. W 86999		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		1. Mailing Address: Correct in this box if needed. WESTERN SECURITY INSURANCE, LLC SCOTT PACKHAM PACKHAM INSURANCE AGENCY INC PO BOX 39 BLACKFOOT ID 83221 USA		SCOTT O PACKHAM 17 S BROADWAY ST BLACKFOOT ID 83221			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name SCOTT O. PACKHAM	Street or PO Address 17 S. BROADWAY STREET		City BLACKFOOT	State ID	Country USA	Postal Code 83221
5. Organized Under the Laws of: ID W 86999		6. Annual Report must be signed.* Signature: Scott O. Packham Name (type or print): Scott O. Packham Date: 07/20/2015 Title: Manager					
Processed 07/20/2015 * Electronically provided signatures are accepted as original signatures.							