No. W 93569		Due no later than May 31, 2015		2	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			SHELDON B CHRISTENSEN			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HSBC INSURANCE LLC KIMBALL JEPPESEN 2410 E 25TH CIRCLE IDAHO FALLS ID 83404			2410 E 25TH CIRCLE IDAHO FALLS 83404 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compan	ies: Enter Nai	mes and Addresses	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	SHELDON B	CHRISTENSEN	677 BIRMINGHAM LN		IDAHO FALLS	ID	USA	83402
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 93569		Signature: Sheldon Christensen			Date: 03/23/2015			
		Name (type or print): Sheldon Christensen			Title: Owner			
Processed 03/23/2015 * Electronically provided signatures are accepted as original signatures.								