

No. W 28275		Due no later than Jan 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		1. Mailing Address: Correct in this box if needed. OLSON PROPERTY LLC KEVIN SHOEMAKER PO BOX 205 FRUITLAND ID 83619		KEVIN SHOEMAKER 241 SW 3RD ST FRUITLAND ID 83619			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	KEVIN SHOEMAKER	7170 DENVER RD	FRUITLAND	ID	USA	83619	
MANAGER	JERETTA SHOEMAKER	7170 DENVER RD	FRUITLAND	ID	USA	83619	
5. Organized Under the Laws of: ID W 28275		6. Annual Report must be signed.* Signature: Kevin Shoemaker Name (type or print): Kevin Shoemaker					
		Date: 12/06/2013 Title: Manager					
Processed 12/06/2013		* Electronically provided signatures are accepted as original signatures.					