

No. W 15488		Due no later than May 31, 2015		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		Annual Report Form		NICK ST JOHN 1180 WILD PHLOX WAY BOISE ID 83709	
		1. Mailing Address: Correct in this box if needed. CONCEPTUAL IMPACT L.L.C. NICK ST JOHN 1180 WILD PHLOX WAY BOISE ID 83709		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	NICK ST JOHN	1180 WILD PHLOX WAY	BOISE	ID	83709
MEMBER	CYNTHIA ST JOHN	1180 WILD PHLOX WAY	BOISE	ID	83709
5. Organized Under the Laws of: ID W 15488		6. Annual Report must be signed.* Signature: Nick StJohn Name (type or print): Nick StJohn Date: 06/18/2015 Title: Member			
Processed 06/18/2015		* Electronically provided signatures are accepted as original signatures.			