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|--|-------------------|--|----------|--|---------|-------------|--|
| No. W 73419 | | Due no later than Apr 30, 2013 | | 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. GO-N-MOW LAWN CARE LLC MARTY D. JACOBS 968 LINCOLN TWIN FALLS ID 83301 | | MARTY JACOBS 3407 N A 3300 E KIMBERLY ID 83341 | | | |
| | | | | 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 | MARTY JACOBS | 3407 N A 3300 E | KIMBERLY | ID | USA | 83341 | |
| MEMBER | SHERRIE L. JACOBS | 3407N 3300E | KIMBERLY | ID | USA | 83341 | |
| 5. Organized Under the Laws of: ID W 73419 | | 6. Annual Report must be signed.* Signature: Sherrie Jacobs Name (type or print): Sherrie Jacobs | | | | | |
| | | Date: 02/13/2013 Title: Member | | | | | |
| Processed 02/13/2013 | | * Electronically provided signatures are accepted as original signatures. | | | | | |