No. W 49975		Due no later than Apr 30, 2015		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		HERMIE CLINE 500 LAKEVIEW LANE SANDPOINT 83864 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	EPIC, LLC LISA C GR 2620 BELLE	1. Mailing Address: Correct in this box if needed. EPIC, LLC LISA C GREENE 2620 BELLEVUE WAY NE #146 BELLEVUE WA 98004 USA					
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Er	ter Names and Addre	sses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
	ER W CLINE C GREENE	500 LAKEVIEW LANE 9836 NE 29TH STREET	SANDPOINT BELLEVUE	ID WA		83864 98004	
5. Organized Under the Laws of:	6. Annual Rep	6. Annual Report must be signed.*					
ID	Signature:	Signature: lisa c. greene		Date: 04/03/2015			
W 49975	Name (type	Name (type or print): lisa c. greene		Title: managing member			
Processed 04/03/2015	* Electronicall	* Electronically provided signatures are accepted as original signatures.					