| No. W 45154 | Du | Due no later than Dec 31, 2013 | | 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 A | AVENUE | 3016 DORMA CALDWELL I | AARON BICANDI 3016 DORMAN AVE CALDWELL ID 83605 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | |
| | er Names and Addresse | s of at least one Member or Manager. | Cit | 61.1 | | D | |
| Office Held Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER AARON BICANDI | | 1010 CRESTWOOD | MERIDIAN | ID | USA | 83642 | |
| MEMBER ZOE AI | NN M. BICANDI | 3016 DORMAN AVENUE | CALDWELL | ID | USA | 83605 | |
| MEMBER CAROL | BICANDI | 3016 DORMAN AVENUE | CALDWELL | ID | USA | 83605 | |
| 5. Organized Under the Laws of: 6. Annual R | | : must be signed.* | be signed.* | | | | |
| ID ID | Signature: Zo | Signature: ZoeAnn Bicandi | | Date: 02/24/2014 | | | |
| W 45154 | Name (type or | Name (type or print): ZoeAnn Bicandi | | Title: Member | | | |
| Processed 02/24/2014 | * Electronically provided signatures are accepted as original signatures. | | | | | | |