No. <b>W 49886</b>	Due no later than Apr 30, 2015	2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	Annual Report Form  1. Mailing Address: Correct in this box if needed.  ADVANCED DRYWALL ILC TRAVUS ALLEN 252 S 55TH W	252 S 55TH W IDAHO FALLS	TRAVUS ALLEN 252 S 55TH W IDAHO FALLS 83402			
NO FILING FEE IF RECEIVED BY DUE DATE	IDAHO FALLS ID 83402	3. <u>New</u> Registere	ed Agent S	ignature:*		
Office Held Name	lames and Addresses of at least one Member or Manager. Street or PO Address	City	State	Country	Postal Code	
MEMBER TRAVUS , MEMBER RYAN ALL MEMBER MARCI AL	ALLEN 252 S 55 W EN 2475 MIDWAY	IDAHO FALLS AMMON IDAHO FALLS	ID ID ID	USA	83403 83406 83402	
5. Organized Under the Laws of:	6. Annual Report must be signed.*					
ID W 49886	Signature: Travus Allen Name (type or print): Travus Allen	Date: 03/06/2015 Title: Managing member				
Processed 03/06/2015	* Electronically provided signatures are accepted as original signatures.					