

No. W 94886		Due no later than Jul 31, 2012 Annual Report Form		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 Address: Correct in this box if needed. BAILEY INSURANCE SERVICES, LLC LESLIE J BAILEY 4234 N PORTAGE AVE MERIDIAN ID 83646		LESLIE J BAILEY 4234 N PORTAGE AVE MERIDIAN ID 83646			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name LESLIE JANE BAILEY	Street or PO Address 4234 N. PORTAGE AVE.		City MERIDIAN	State ID	Country USA	Postal Code 83646
5. Organized Under the Laws of: ID W 94886		6. Annual Report must be signed.* Signature: Leslie J. Bailey Name (type or print): Leslie J. Bailey Date: 08/28/2012 Title: Manager					
Processed 08/28/2012 * Electronically provided signatures are accepted as original signatures.							