

No. W 23289		Due no later than Mar 31, 2013 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. SCENIC SCAPES, LLC CADE JACOBS PO BOX 1063 VICTOR ID 83455		CADE JACOBS 5411 S 1000 W VICTOR ID 83455			
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	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	CADE JACOBS	924 S 200 W	VICTOR	ID	USA	83455	
MEMBER	KRISTY JACOBS	924 S 200 W	VICTOR	ID	USA	83455	
5. Organized Under the Laws of: ID W 23289		6. Annual Report must be signed.* Signature: CadeJacobs Name (type or print): CadeJacobs					
		Date: 04/25/2013 Title: Owner					
Processed 04/25/2013 * Electronically provided signatures are accepted as original signatures.							