No. <b>W 77118</b>		Due no later than Aug 31, 2015			2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form  1. Mailing Address: Correct in this box if needed.  CLEMMENS TAXIDERMY STUDIO, LLC CAROL CLEMMENS 8203 HILL RD BOISE ID 83714 USA  mes and Addresses of at least one Member or Manager.		]	WALT CLEMMENS 8205 HILL RD BOISE ID 83714  3. New Registered Agent Signature:*			
				7				
4. Limited Liability Compa Office Held	nies: Enter Nai Name	nes and Addresses	Street or PO Address		City	State	Country	Postal Code
MEMBER MEMBER	WALT CLEMMENS CAROL CLEMMENS		8205 HILL ROAD 8205 HILL ROAD		BOISE BOISE	ID ID	USA USA	83714 83714
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 77118		Signature: Carol Clemmens Name (type or print): Carol Clemmens			Date: 07/04/2015 Title: Member			
Processed 07/04/2015 * Electronically provided signatures are accepted as original signatures.								