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|---|------------------------|---|--|--|-------------|----------------|----------------------|
| No. W 106385 | | Due no later than Sep 30, 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. ERIC LOFTHUS INSURANCE LLC ERIC LOFTHUS 425 MORNING SUN CT NAMPA ID 83686 | | ERIC LOFTHUS 425 MORNING SUN CT NAMPA ID 83686 | | | |
| 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 MEMBER | Name ERIC J LOFTHUS | Street or PO Address 425 MORNING SUN CT | | City NAMPA | State ID | Country USA | Postal Code 83686 |
| 5. Organized Under the Laws of: ID W 106385 | | 6. Annual Report must be signed.* Signature: Eric Lofthus Name (type or print): Eric Lofthus Date: 07/15/2013 Title: Member | | | | | |
| Processed 07/15/2013 * Electronically provided signatures are accepted as original signatures. | | | | | | | |