No. W 123117	Due no later than Mar 31, 2014 Annual Report Form 1. Mailing Address: Correct in this box if needed. 7 BAR O P.L.L.C. JAMES WEBB DORENKAMP PO BOX 879 GLENS FERRY ID 83623 USA		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080			JAMES DORENAMP DVM 1147 S STEEN RD GLENS FERRY ID 83623 3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	USA						
4. Limited Liability Companies: Enter N	ames and Addresses o	f at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER JAMES WE	BB DORENKAMP	PO BOX 879 1147 S STEEN RD	GLENNS FERRY	ID	USA	83623	
5. Organized Under the Laws of: 6. Annual Report must be signed.*							
ID	ID Signature: James W Dorenkamp			Date: 01/28/2014			
W 123117 Name (type or print): James W Dorenkar		int): James W Dorenkamp	Title: Owner				
Processed 01/28/2014	* Electronically provided signatures are accepted as original signatures.						