No. W 45388	Due no later than Dec 31, 2013	2. Registered Agent and Office (NOT A P.O. BOX)
Return to:	Annual Report Form	Need to Appoint
SECRETARY OF STATE 450 N 4th STREET	1. Mailing Address: Correct in this box if needed.	CHEIS PEARCOU
PO BOX 83720 BOISE, ID 83720-0080	5995 STATE STREET ASSOCIATES, LLC	10445 W. GULTANA LN
	839 E WINDING CREEK DR STE 102	
	EAGLE ID 83616	WIRDEN LITY ID 8374
NO FILING FEE IF	10445 W. GULTANA LANG	3. New Registered Agent Signature.
RECEIVED BY DUE DATE	CONRIDEU CITY ID BE714	Monmiteller
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions.		
Manager or Member Name Street or PO Address City State Country Postal Code		
Manager Member - CHEIS PEN RSON 10A45 WI SALTALIA LII BIRESTUCITY		
Manager Member		83714
Manager Member		
Manager Member		
5. Organized Under the Lav	ws of: 6.	
IDVIIO	Signature:	Date:
IDAHO	L MAN MARRILL	11.5.13
W 45388	Name (type or print):	Title:
	CHRIS FENRYOU	MOUNE 2R
Issued 11/05/2013 by JL1		128235
INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM		

## INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

Block 1: Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.

Block 2: To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho, not a Post Office Box or Personal Mail Box.

**Block 3:** Only a **new** registered agent must sign in Block 3.

Block 4: Check either Member or Manager. Enter names and business addresses of managers or members of the limited liability company. Note: DO NOT put "same as last year" or "same as above". These will not be accepted. Changes here will not affect the address in Block 1. If more space is needed please add an attachment.

Block 5: May not be altered through the use of this form.

Block 6: The annual report must be signed by a person authorized to represent the limited liability company. Print or type the name of the signer below the signature.

\*\* The image of this form will be available on the internet once it has been filed. DO NOT enter Social Security numbers.

If the limited liability company is no longer doing business in Idaho, you may file the appropriate form. Forms are available on the website at www.sos.idaho.gov. However, if no timely annual report is filed, administrative action will be taken, at no cost to the limited liability company to terminate the legal existence. If you have any questions contact the Commercial Division at (208) 334-2301.

If the document is incorrect, is there a telephone number to reach you for corrections?

POSTMARK DATES WILL NOT BE ACCEPTED