

No. W 84540	Due no later than Jun 30, 2014 Annual Report Form		2. Registered Agent and Office (NOT A P.O. BOX) ELISABETH O'MEARA 157 PINECREST LP SANDPOINT ID 83864																																			
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. O'MEARA I, LLC ELISABETH O'MEARA 157 PINECREST LOOP SANDPOINT ID 83864		3. <u>New</u> Registered Agent Signature.																																			
4. Limited Liability Companies: Enter Names and Addresses of Managers OR Members. See Instructions. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Manager or Member</th> <th style="width: 25%;">Name</th> <th style="width: 25%;">Street or PO Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Country</th> <th style="width: 5%;">Postal Code</th> </tr> </thead> <tbody> <tr> <td>Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/></td> <td>ELISABETH O'MEARA</td> <td>157 Pinecrest Loop</td> <td>Sandpoint</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: right;">Id, 83864</td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Manager <input type="checkbox"/> Member <input type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Manager or Member	Name	Street or PO Address	City	State	Country	Postal Code	Manager <input checked="" type="checkbox"/> Member <input type="checkbox"/>	ELISABETH O'MEARA	157 Pinecrest Loop	Sandpoint				Manager <input type="checkbox"/> Member <input type="checkbox"/>						Id, 83864	Manager <input type="checkbox"/> Member <input type="checkbox"/>							Manager <input type="checkbox"/> Member <input type="checkbox"/>						
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5. Organized Under the Laws of: IDAHO W 84540	6. Signature: <u>Elisabeth O'Meara</u> Date: <u>6.26.14</u> Name (type or print): <u>ELISABETH O'MEARA</u> Title: <u>manager</u>																																					
Issued 06/23/2014 by JAH		130771																																				