No. **W 107535**	**Due no later than Oct 31, 2014** **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 **NO FILING FEE IF RECEIVED BY DUE DATE**	**1. Mailing Address: Correct in this box if needed.** THETA 102 LLC TIM JENKINS 3911 N 5TH E IDAHO FALLS ID 83401	TIM JENKINS 4009 N 5TH E IDAHO FALLS 83401 3. New Registered Agent Signature:*

4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
MEMBER	LORAN SWENSEN	3911 N 5TH E	IDAHO FALLS	ID	USA	83401
MANAGER	TIM JENKINS	4009 N 5TH E	IDAHO FALLS	ID	USA	83401

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID **W 107535**	Signature: Tim Jenkins	Date: 11/11/2014
	Name (type or print): Tim Jenkins	Title: Manager

Processed 11/11/2014

* Electronically provided signatures are accepted as original signatures.