No. W 56530		Due no later than Nov 30, 2012		2.	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			JEREMY A BEST 4600 SKYLINE LOOP VICTOR ID 83455 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. JEREMY'S AUTO REPAIR-LLC JEREMY A BEST 1785 DIAMOND HITCH DR JACKSON WY 83001		_				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Na	mes and Addresses of at leas	t one Member or Manager.					
Office Held	Name	St	reet or PO Address	(City	State	Country	Postal Code
MANAGER JEREMY A BE		BEST 46	00 SKYLINE LOOP	1	/ICTOR	ID	USA	83455
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Jeremy Best			Date: 09/14/2012			
W 56530		Name (type or print): Jeremy Best			Title: Manager			
Processed 09/14/2012 * Electronically provided signatures are accepted as original signatures.								