

No. W 94019		Due no later than Jun 30, 2015 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		1. Mailing Address: Correct in this box if needed. S.S. REEL CONSULTING, PLLC SALLY S REEL 3726 21ST ST E LEWISTON ID 83501 USA		SALLY SUMERLIN REEL 3726 21ST ST E LEWISTON 83501			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name SALLY S REEL	Street or PO Address 3726 21ST STREET E		City LEWISTON	State ID	Country USA	Postal Code 83501
5. Organized Under the Laws of: ID W 94019		6. Annual Report must be signed.* Signature: Sally Reel Name (type or print): Sally Reel Date: 04/19/2015 Title: Manager					
Processed 04/19/2015 * Electronically provided signatures are accepted as original signatures.							