No. W 75834			Due no later than Jul 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		BORCHERS, JAMIN MAR PO BOX 140	1. Mailing Address: Correct in this box if needed. BORCHERS, LLC. JAMIN MARTIN PO BOX 140658 BOISE ID 83714		JAMIN MARTIN 1107 HORSESHOE BEND RD EAGLE ID 83616 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter I	Names and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	JAMIN T	MARTIN	PO BOX 140658	BOISE	ID	USA	83714	
5. Organized Under the Laws of:			6. Annual Report must be signed.*					
ID W 75834			Signature: Jamin Martin		Date: 05/14/2014			
		Name (type	Name (type or print): Jamin Martin		Title: Managing Member			
* Electronically provided signatures are accepted as original signatures.								