

No. <b>W 104471</b>	<b>Due no later than Jun 30, 2015</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	<b>1. Mailing Address: Correct in this box if needed.</b>  SIXTY PERCENT LLC JASON KOVAC 4091 W STATE ST BOISE ID 83703		KATHLEEN ROMA 1045 S ANCONA SUITE 150 EAGLE ID 83616			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>			3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held MEMBER	Name JASON KOVAC	Street or PO Address 1119 E. STATE ST	City BOISE	State ID	Country USA	Postal Code 83712
5. Organized Under the Laws of:  <b>ID</b> <b>W 104471</b>	6. Annual Report must be signed.*  Signature: Jason Kovac Name (type or print): Jason Kovac  Date: 06/12/2015 Title: President					
Processed 06/12/2015	* Electronically provided signatures are accepted as original signatures.					