No. <b>W 93471</b>		Due no later than May 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	ROB GREE ROB GREE 1427 BLUE	Annual Report Form  1. Mailing Address: Correct in this box if needed.  ROB GREEN LMA, LLC  ROB GREEN  1427 BLUE LAKES BLVD N  TWIN FALLS ID 83301		ROB GREEN 1427 BLUE LAKES BLVD N TWIN FALLS ID 83301  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE							
4. Limited Liability Companies: Ent	er Names and Addre	esses of at least one Member or Manager.					
Office Held Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER JEANNE MANAGER ROB G	TTE BOLTON REEN	1427 BLUE LAKES BLVD N P O BOX 5699	TWIN FALLS TWIN FALLS	ID ID	USA USA	83301 83303	
5. Organized Under the Laws of:	6. Annual Re	6. Annual Report must be signed.*					
ID	Signature:	Signature: Jeannette Bolton Date: 05/12/2016					
W 93471	Name (typ	e or print): Jeannette Bolton		Title: Member			
Processed 05/12/2016	* Electronicall	* Electronically provided signatures are accepted as original signatures.					