No. W 116932		Due no later than Aug 31, 2013		2. R	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. APORIA, LLC 6798 W. LEGACY DR. RATHDRUM ID 83858 USA		7 C	BART J MITCHELL 7853 N HILLIARD CT COEUR D ALENE ID 83815 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	anies: Enter Nai	nes and Addresses of at	least one Member or Manager.					
Office Held	Name		Street or PO Address	Cit	У	State	Country	Postal Code
MANAGER FAREL D WOOD		OOD	6798 W LEGACY DR.	RA	THDRUM	ID	USA	83858
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Farel Wood			Date: 06/18/2013			
W 116932		Name (type or print): Farel Wood			Title: Member Manager			
Processed 06/18/2013 * Electronically provided signatures are accepted as original signatures.								