

No. W 16033		Due no later than Jul 31, 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 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. AUTO GLASS EXPERTS, LLC KARALEE ROBINSON 495 E. 1ST STREET IDAHO FALLS ID 83401 USA		GREGORY P MEACHAM 2000 JENNIE LEE DR IDAHO FALLS ID 83404		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	JOHN D ROBINSON	495 EAST 1ST ST	IDAHO FALLS	ID		83401	
MEMBER	KARALEE ROBINSON	495 EAST 1ST ST	IDAHO FALLS	ID		83401	
5. Organized Under the Laws of: ID W 16033		6. Annual Report must be signed.* Signature: Karalee Robinson Name (type or print): Karalee Robinson Date: 05/26/2015 Title: Owner					
Processed 05/26/2015		* Electronically provided signatures are accepted as original signatures.					