No. <b>W 114699</b>	Due no later than Jun 30, 2015	2. Registered Agent and Address (NO PO BOX)
Return to: SECRETARY OF STATE	Annual Report Form  1. Mailing Address: Correct in this box if needed.	STEPHANIE ESPINOZA-LEVY 200 W 15TH N MOUNTAIN HOME ID 83647
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	LIGHTNING HEART LLC STEPHANIE ESPINOZA-LEVY 200 W 15TH N	
	MOUNTAIN HOME ID 83647	3. New Registered Agent Signature:*
NO FILING FEE IF RECEIVED BY DUE DATE		
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
MANAGER STEPHANIE	MARINA ESPINOZA-LEVY 200 W 15TH N	MOUNTAIN HOME ID USA 83647
5. Organized Under the Laws of:	6. Annual Report must be signed.*	
ID	Signature: StephanieEspinoza-Levy	Date: 07/23/2015
W 114699	Name (type or print): StephanieEspinoza-Levy	Title: Business Owner
Processed 07/23/2015	77/23/2015 * Electronically provided signatures are accepted as original signatures.	