No. W 44389	Due no later than Nov 30, 2014		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form			WILLIAM ANTHONY LASPINA 4329 S STARGAZER PL BOISE 83716-6652 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. ALSS LTD CO WILLIAM ANTHONY LASPINA 4329 S STARGAZER PL BOISE ID 83716-6652		BOISE 8				
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 WILLIAM ANTHONY LASPINA 221 E MALLARD DR APT 114			BOISE	ID		83706	
5. Organized Under the Laws of:	anized Under the Laws of: 6. Annual Report must be signed.*						
ID	Signature: william A Laspina			Date: 10/04/2014			
W 44389	Name (type or print): william A Laspina			Title: Manager			
Processed 10/04/2014	* Electronically provided signatures are accepted as original signatures.						